

No. 5709

IN THE <sup>3</sup>

United States Circuit Court of Appeals

For the Ninth Circuit

UNITED STATES OF AMERICA,

*Appellant,*

vs.

JOHN J. FULTON Co. (a corporation), Claimant of 48 Bottles More or Less, of an Article of Drugs Labeled in Part "Fulton's Compound RX 1," and 24 Bottles, More or Less, of an Article of Drugs Labeled in Part "Fulton's Compound RX 2," Shipped by the John J. Fulton Company,

*Appellee.*

BRIEF FOR APPELLEE.

A. P. BLACK,

114 Sansome Street, San Francisco, California,

*Attorney for Appellee.*

HOWE & GRAHAM,

Stuart Building, Seattle, Washington,

*Of Counsel.*

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## BRIEF FOR APPELLEE.

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That the Court may understand the situation of the respondent in this case, it is proper to make this preliminary statement:

The respondent, after over twenty-five years of experiment and improvement in their preparations, and after having received many thousands of testimonials from private individuals suffering from Bright's Disease and Diabetes, finally resolved to *reach the doctors* of America and convince them against their prejudices that there is a remedy for

those diseases which are *killing off about 150,000 of our people every year.*

To that end, involving several years of time and many thousands of dollars of expense, we addressed and mailed the offer below to the physicians listed in the American Medical Directory, and not only once but from four to five times, aiming to reach every physician in America having Bright's Disease or Diabetes himself or in his family with a practical demonstration of the fact that albumen and symptoms in Bright's Disease and sugar and symptoms in Diabetes (the latter in patients over 45) are reducible by internal treatment, viz.:

“If there is a case of Bright's Disease or Diabetes in your family showing two per cent or more of albumen or sugar, in order to demonstrate that wasting albumen and sugar are being absorbed in Bright's Disease and Diabetes, we will, without charge, put in the express for you, F. O. B. Detroit, one-half dozen (two months' treatment) of the appropriate agent, formulae and rationale herein, expecting in most cases in which there is a reasonable prospect of sixty days of life that this half dozen will reduce the albumen (or sugar) over half, with physical improvement beginning to show. If the usual diet prescribed in these cases is being observed we suggest it be continued without change so there will be no uncertainty in your mind as to the cause of the results.”

We later widened the above offer by proffering a free thirty day demonstration to every physician in America treating a Diabetic patient over 45 years of age. As follows:



“ANNOUNCING INNOCUOUS, INTERNAL TREATMENT  
THAT REDUCES SUGAR AND SYMPTOMS IN DIABETES.

If this seems difficult to believe and you are treating a Diabetic over 45 we tender you a free demonstration.

Summary of results in several hundred cases with ingredients and rationale mailed on request. As Diabetic Gangrene is one of the most serious aspects the first dozen reports are held to cases that involved gangrene to show how definitely this symptom also follows sugar assimilation.

Physicians are discontinuing injections at once; capsules discontinued two months after sugar disappears.

Important Diabetic practice is developing in cities and physicians' accounts even in small towns are running over a hundred dollars each.

All inquiries will get the literature but, for obvious reasons, a free demonstration will only follow to those stating they are treating a Diabetic over 45. We expect the demonstration alone to reduce the sugar and symptoms 20% to 40%. Can commence testing for decreasing sugar the second week.

JOHN J. FULTON Co.,  
72 First St., San Francisco, Calif.”

In response to the first offer above 762 physicians, representing all schools and societies, asked for and were served with a full 60 day course of the treatment. From these we have had about 740 letters reporting their results, several hundred of which will be found summarized in the printed folders following.

To date something over 1700 physicians have asked for and have been served with the free 30 day demonstrations. From these we have received several hundred letters giving their results.

In a word, to date over 2400 physicians (which number is increasing daily), representing all schools and societies, have asked for and have been served with the free demonstrations and from these physicians we have had something over a thousand letters, overwhelmingly attesting the ability of these agents to reduce albumen and symptoms in Bright's Disease and sugar and symptoms in Diabetes, the flat failures (those reported as producing no benefit whatever) never totalling as much as ten per cent.

And that the epitomes of these reports as printed herewith might have due credence a great majority of the epitomes were compared with the original letters by the late Thos. S. Burnes, Notary Public and Commissioner of Deeds, and the transcriptions were certified by him as correct over his notarial seal, viz.:

"I, Thomas S. Burnes, authorized by the State of California to authenticate documents, have compared figures above and those on the reverse hereof to the double rule with the Physician's reports and urinalyses and certify they are correctly transcribed and that the correspondence shows the physicians are all unknown to affiant and have no interest other than to record and report results.

(Signed)

(Seal)

Thomas S. Burnes,  
Notary Public."

The epitomes shown in Exhibit "A" will now be understood.

There are about 800,000 people in the United States who are suffering from either Bright's Disease or Diabetes.

The medical profession generally state that there *is no known remedy for these diseases.*

“Insulin” is the remedial agent now prescribed but it does not cure; it, at most, gives temporary relief.

In this state of affairs it is not to be wondered at that physicians *who themselves have been sufferers from these diseases* would be willing to try *any* remedy that gave any *hope of relief* to them. It was either *try it* or *get ready to die*. Hundreds of them did try the preparation and the results have been most gratifying.

Having been benefited themselves, naturally they would wish to bring the same benefits to their patients and the Company is now in receipt of a constant stream of orders and reorders for their patients and there are now on file hundreds and hundreds of letters from these doctors stating the beneficial results to their patients. From these letters the respondent feels justified in putting on its labels the very modest statement complained of by the Department of Agriculture.

Medical science shows a varied history. Beginning in absolute ignorance it has slowly evolved a real science, and in some fields of knowledge deserves the admiration of the world; but alongside of this progress there still remains an astonishing amount of ignorance and stupid prejudice which is highly detrimental to the human race.

Nearly every new discovery in medical science has met with the most violent opposition of the rank and



file of the profession; and many benefactors of the human race have been literally hounded to an early grave through the persecutions set on foot by the "regular schools" of medicine.

The respondent has felt the "forked lightning of the wrath" of this bigotry and prejudice and is still the object of persecution by the "higher ups" of the medical associations, who simply close their eyes to the truth and refuse to see the light.

So strong is this prejudice that the doctors *who have themselves been benefited by the use of respondent's preparations* and *who are benefiting scores of their patients therewith*, are afraid to have their names published for fear of persecutions by the officials of their state and county medical societies.

But the number of physicians who are using the preparations is increasing every week and in course of time if the respondent can be allowed to keep on with its good work, the number of those using them will be so great as to compel the medical societies to recognize the value of the same and to stop trying to hamper and ruin respondent.

This case is one of four that are pending against respondent at the present time. The respective U. S. attorneys at Baltimore, Denver and Salt Lake have very kindly consented to hold all proceedings in abeyance in their districts till this case is finally determined.

There is attached hereto and marked Exhibit "A" a bunch of literature which is sent to doctors all over the country who ask to have a free treatment.



A portion of this is a digest of several hundred reports from physicians who have used, and are now constantly using, respondent's products in their practice.

This brings us to the discussion of the question before the Court, viz.: "Are the labels used by respondent a violation of the Food and Drug Act?"

The particular "misbranding" which is attempted to be charged in the libel is under the third subdivision, which is:

"Third. If *its package or label shall bear or contain any statement, design or device regarding the curative or therapeutic effect of such article or any of the ingredients or substances contained therein,* WHICH IS FALSE AND FRAUDULENT."

It is charged that on the bottle label, marked "Rx 1," this language is used:

"We have received many letters from physicians reporting in cases \* \* \* of Bright's disease and albuminuria \* \* \* nephritis \* \* \* that the use of this compound was attended with decrease in the albumen in the urine, or improvement in the physical condition of the patient, or both" \* \* \*.

"The same wording is charged to be on the "wrapper" and also upon the "circular."

The identical language is then alleged to be on the label, wrapper and circular used on what is termed "Rx 2" in regard to diabetes and decrease in sugar.

Now, we ask, in what way is that statement "*false and fraudulent*"? Does the government set forth

*anything at all* to show that respondent has *not* received many letters from physicians and that those letters *do not* report that the use of the "compound" is attended with decrease in albumen and sugar as the case may be? We simply state the fact that we *have received the letters* and then state the further fact that *those letters report certain results*.

There is no attempt whatever to negative the truth of those statements. The only basis upon which the government predicates its case is a letter from C. V. Marvin, Acting Secretary of Agriculture, which communication is marked exhibit "A" and made a part of the libel and in which the acting secretary states his conclusion that there is a misbranding because, as he thinks, "the articles contain no ingredient or combination of ingredients capable of producing the effects claimed." (Bottom of p. 10 and top of p. 11, Apostles.)

How can the opinion of the acting secretary that the compound has no therapeutic value negative the fact that respondent has received many letters from physicians which letters state certain results?

Before the government is entitled to seize and destroy the property of respondent the latter must put on its labels something that is in fact "*false and fraudulent*."

The government must be in a position to show that we have not received such letters and that they do not contain the statements alleged.

There is no allegation in the libel which negatives either one of these statements; and until the learned United States Attorney is in a position to prove that

we have no such letters; and that they do not contain the statements alleged, what right has he to ask that we be put to the trouble and expense of a trial at a great distance from home. San Francisco is the home of respondent and if we had to go to Seattle, then to Baltimore, then to Denver and then to Salt Lake to make a separate defense; taking necessary witnesses to these various places; even though we won every case, we would still be the loser by thousands of dollars. And that would not be the end, for the government would still be in a position to make other seizures all over the country and bring financial ruin to respondent while carrying on its losing battle against respondent.

Unless there be some real justification for it, the Courts will not tolerate such a course of intolerable persecution; and, to its credit be it said, the Department of Justice is willing to abide the final decision in this case for the determination of the actions begun in other jurisdictions.

Now for the cases.

*U. S. v. 95 Barrels of Vinegar*, 265 U. S. 438 is not in point.

That was a case in which the label stated the contents of the bottle to be "Apple Cider Vinegar, made from selected apples," when the fact was the vinegar was made from *dried apples* and not from apple cider.

Of course the statement on the label was false and misleading.

*Bradley v. United States*, 264 Fed. 79, is relied upon by counsel to sustain government's contention.



That was a mineral water case and the shipper put on his label *his own* recommendation of the water for “*treatment*” of *nine different diseases*.

That label in effect said to the public: “*We recommend this mineral water as a remedy for Bright’s Disease, Diabetes, Dropsy, etc., etc.*”

The Court (p. 81) said:

“It seems to us that words, ‘Recommended in the treatment of Bright’s disease, etc., Directions’ \* \* \* could only mean that the use of the water in the treatment of the diseases named *would effect a cure or alleviation* of such diseases.”

But that is a different situation from the instant case. The Fulton Co. makes no recommendation at all, *and makes no statement as to the therapeutic value of its products*. It states a simple fact that it has received many letters from physicians reporting certain results following the use of its products.

The government cannot question the fact that we have received those letters, nor can it question the fact that those letters contain the statements set out in the labels.

If that be true, then in no sense can the labels be said to contain any statement that is “false and fraudulent.”

Suppose we put upon our labels these words: “We have received one hundred letters from one hundred physicians in the United States who report that they have cured themselves of diabetes by using Fulton’s Compound,” and suppose those letters are all on file in our office and actually contain the statement set



out, would that be a "false and fraudulent" statement on the part of Fulton and Co.? We think not. It is a mere statement of fact—not false—not fraudulent.

*The issue here is not the therapeutic value of the Fulton's Compound but whether our labels speak the truth.*

*The government has tendered no issue upon that point, and until such issue is tendered respondent should be let alone.*

Suppose the respondent today receives a letter from a physician, let us call him "Dr. X," in Denver, saying he is suffering from diabetes and would like half a dozen bottles of respondent's compound, and that the bottles are shipped to him from San Francisco. Suppose that six weeks thereafter "Dr. X" writes to the respondent a letter in which he says: "I have used your compound and am glad to say the sugar content of the urine has been reduced from 4% to  $\frac{1}{2}$  of 1% and I am feeling greatly improved."

Suppose respondent should put on its label at the time of its next shipment these words:

"We have received a letter from 'Dr. X' of Denver in which he says that the use of our compound in his own case was followed by a reduction of the sugar content in the urine and general improvement in health," would there be anything "false and fraudulent" in that label? How could a statement by the Acting Secretary of Agriculture that in his opinion Fulton's Compound had no therapeutic value raise the issue as to the truth of the fact that the letter was

received and contained the statement set out in the label?

If we were forced to a trial upon the real issue here, we can produce hundreds and hundreds of letters from physicians from all parts of the country attesting in the most unqualified manner the beneficial effects of the use of our products. These letters and reports may be inspected by the U. S. Attorney and the Court if desired, but the names of the physicians should not be published for the simple reason that it would subject them to undue persecutions on the part of certain officials in the medical societies who are still so "tied to their idols" that they will not take the trouble to investigate the matter.

Years ago the respondent offered to make a test case by taking some of its compound into an adjoining state and shipping it to a druggist in San Francisco so the trial could be had here where witnesses can be called at little expense, both laymen and physicians, but the offer was declined.

The learned counsel say in their brief the "words are not actionable *per se*, yet they are in that middle ground \* \* \* and in such middle ground a jury should be left to determine whether or not the words used constitute a remedial or therapeutic claim on this drug label" (p. 8 of brief).

It is respectfully submitted that our great government is too big to be engaged in straining for technical, harsh and unreasonable constructions of its *quasi* criminal statutes.

The fair reading of our label will disclose no violation of the Food and Drug Act. At the most our label declares that many physicians who have *actually tried* our preparations report that certain beneficial results followed. As opposed to that the government claims that some chemist *who has not tried* the preparations reports that there is no therapeutic value to be found therein. The government makes no statement that any physician *who has used and tried the preparations* reports that there is no therapeutic value therein. Even if there were such diversity of opinion among doctors that would not be a "misbranding" because the statement on the label must be both "false and fraudulent," and under the decisions where it is a dispute among doctors the courts will not decide which party is right.

In *M'Lean Medicine Co. v. U. S.*, 253 Fed. page 696, we find this language:

"The testimony of physicians as to their individual opinions of the efficacy of the preparation would have been properly rejected if there had been disclosed *a difference of medical opinion* on the subject, as a conviction could not properly rest upon a claim of fraudulent statements, when they *were based upon mere matters of opinion on such debatable subjects* (italics ours) citing, among others, the case of *School of Magnetic Healing v. McAnnulty*, 187 U. S. 94 (47 L. Ed. 90)."

This latter case contains a beautiful discussion of the whole question of "*opinions*" in medical matters. On page 94 of 47 L. Ed. we find this language:

"There is no exact standard of absolute truth by which to prove the assertion false and a fraud.



We mean by that to say that the claim of complainants cannot be the subject of proof as of an ordinary fact; it cannot be proved as a fact to be a fraud, or false pretense or promise, nor can it properly be said that those who assume to heal bodily ills or infirmities by a resort to this method of cure are guilty of obtaining money under false pretenses, such as are intended in the statutes, which evidently do not assume to deal with mere matters of opinion upon subjects which are not capable of proof as to their falsity. We may not believe in the efficacy of the treatment to the extent claimed by complainants, and we may have no sympathy with them in such claims, and yet their effectiveness is but matter of opinion in any court."

In the case of *Kar-Ru Chemical Co. v. U. S.*, 264 Fed. 921—a case tried in the Southern Division of the Western District of Washington before Judge Cushman and appealed to the Circuit Court of Appeals, Ninth Circuit, the instructions given by Judge Cushman are approved, and on page 928 we find the following language:

"The law requires that the government must prove beyond a reasonable doubt, not only that the statements upon the labels are false, but also that the statements are fraudulent. The statements may be false and not fraudulent. To be considered fraudulent within the meaning of the law requires that the defendant should either know that the remedy which he offers to the public is of no curative value or that he represents to be of curative value recklessly and without caring whether it would cure or whether it did not, for the purpose of defrauding his customers and getting their money for an article which he knew in fact, or ought to have known, was of no value. If you find from the evidence that the defendant honestly believed, and had reasonable ground to



believe, that his remedy was of curative value, then your verdict must be not guilty, no matter if in fact the remedies were worthless from a medical point of view."

"These instructions were in accordance with the law as declared by the Supreme Court in seven cases of *Eckman's Alterative v. U. S.*, 239 (citing cases), where the court excluded the field where there might be differences of opinion between schools and practitioners, and explained the words 'false' and 'fraudulent' to conform to such exclusions."

7 *Cases, etc. v. U. S.*, 239 U. S. 510. Also L. R. A. 1916D, 164.

On page 169 of the last volume cited we find this language:

"Congress deliberately excluded the field where there are honest differences of opinion between schools and practitioners. Cong. Rec. 62d. Cong. 2d Sess. vol. 48, pt. 12, Appx. p. 675. It was, plainly, to leave no doubt upon this point that the words 'false and fraudulent' were used. This phrase must be taken with its accepted legal meaning, and thus it must be found that the statement contained in the package was put there to accompany the goods with actual intent to deceive,—an intent which may be derived from the facts and circumstances, but which must be established."

In *U. S. v. Natura Co.*, 250 Fed. 925, the lamented Judge Dooling says:

"The defendant is charged with a violation of the Food and Drug Act in misbranding a certain article of medicine sold by it and known as 'Akoz.' To fall within the statute the package or label must bear or contain some statement, design or device regarding the curative or therapeutic effect of the article, or some ingredient or substance contained therein, which is *false and*

*fraudulent.* No purpose could be served here in reviewing the testimony. It may be said in a general way that the testimony of the government was chiefly 'expert' testimony; that is to say, testimony of skilled persons as to the possible effect of the use of Akoz. *None of them had ever experimented with it*, or tried it either on themselves or others nor had any of them ever had the opportunity to observe any results from its use. The testimony for the defendant was by witnesses, physicians and others who had used the medicine themselves or had observed its effect on others, and all testified to its beneficial effects."

Judgment of "not guilty" was entered.

Judge Trippet in the case of *U. S. v. Tuberclocide Co.*, 252 Fed. 938, discusses very fully the differences of opinion among physicians themselves and the different schools of medicine. On page 941 he says:

"What do these people do that were going to buy this formula and sell this medicine? They get physicians to examine patients that have been treated with it. I think they had four physicians to investigate it, and these physicians advised them that it was a remedy for tuberculosis. Aside from that they bring three physicians here who say they have prescribed this stuff to patients and that it has proven itself by experience to be a remedy. The government doctors never prescribed it to a person, while one of the witnesses for the defense testified that he had treated 3000 patients with it with good results. Do not these people representing defendant have a right to act upon that? Can anybody say they wilfully falsified anything in the face of that testimony? We all know from our own observations that doctors disagree. I have heard them disagree in making sworn statements in this court many a time. Schools of physicians disagree. One school thinks that the other school does not know anything, and

that they are practicing fraud and deception. Can it be fairly said that a man is practicing a fraud when he acts upon the advice of a physician, although other physicians disagree with him? Have we come to such a pass that fraud can be attributed to a man when he accepts the advice of a doctor, or several doctors; notwithstanding that other physicians may disagree with those whose advice he accepts?"

How stands it with the respondent?

It sends a *bona fide* offer of a *free demonstration* to *every physician in the United States* who suffers from Brights' disease or Diabetes. Hundreds of them accepted the offer and *ever since have become regular purchasers of respondent's preparations.*

They *volunteer* the information that reduction of albumen in Brights' disease and of sugar in Diabetes follows the use of said preparations.

*How can* the government claim that those statements are false and *how can* it claim that when we say on our labels that we have these letters, by the hundreds, making these statements, we are guilty of a *misbranding*?

It is the undoubted law that one is entitled to rest upon statements of physicians in reference to any given remedy; and if he does so he is not to be prosecuted as a criminal or to have his goods seized and destroyed because some other doctor, or set of doctors, may not agree with the doctors whose statements he relies upon.

The respondent is dealing *only with physicians whose names are listed among the duly licensed and*



*accredited physicians of the United States. Hundreds and hundreds of them have used respondent's remedies and, after so using them, report certain results following such use. Respondent puts on its labels a small part of what these reports state. The truth of the statements on the labels cannot be doubted or questioned. They are not false, but true. They are not fraudulent but, on the contrary, announce one of the most tremendous facts vital to humanity; viz.: That the physicians of America have had called to their attention a remedy for Brights' disease and Diabetes and that thousands of them have, by actual use thereof, demonstrated the remarkable efficacy of respondent's remedies in those diseases.*

It is respectfully submitted that the judgment of the District Court should be affirmed.

Dated, San Francisco,  
May 11, 1929.

A. P. BLACK,  
*Attorney for Appellee.*

HOWE & GRAHAM,  
*Of Counsel.*



# Diabetes Mellitus

Exhibit A.

Summary of Results Reported by Physicians in Several Hundred Cases  
July, 1928

Announcing an innocuous herbal agent, absolutely devoid of dangerous reactions, that does not have to be continued indefinitely and which so decisively reduces sugar and symptoms in patients of 45 and over that for over four years we supplied it to Physicians on a refund basis if the case did not make the usual response to the first treatment, the requests for refund actually being less than five per cent.

And in order to give the Medical Profession a practical demonstration we inaugurated the most comprehensive and convincing program we could conceive of, viz., we tried to reach every Physician in America having Diabetes himself or in his family. Circular letters offering the demonstrations were accordingly mailed to the 145,000 Physicians listed in the American Medical Directory. This looked like inviting disaster, for it seemed reasonable to assume that no Physician having Diabetes himself or in his family would send \$1000 to 3000 miles for further measures who had not already exhausted the local prescription counters, and that therefore the only response would be from cases that had resisted treatment and as a rule would look impossible. It was under these difficult conditions that the offers went forward. Four hundred and sixty-two Physicians asked for the demonstration, some involving gangrene and some reporting they had tried nearly everything else without results. All were served. From these we have had 454 reports,

Connecticut ++  
Diabetes, female. "If it proves good in her case will use it in my practice."  
"Have had some of this medicine in the country on her case. They all gave a very poor prognosis. Also had some of the best men at Yale look her over."

4 mos. later—Enclosed find complete sugar report. (Tests about 6 days apart.)  
1st Test ... 0.83% 10th Test ... 0.08%  
2nd Test ... 0.38% 11th Test ... 0.13%  
3rd Test ... 0.61% 12th Test ... 0.38%  
4th Test ... 0.25% 13th Test ... 0.25%  
5th Test ... 0.24% 14th Test ... 0.28%  
6th Test ... 0.33% 15th Test ... 0.11%  
7th Test ... 0.28% 16th Test ... 0.75%  
8th Test ... 0.28% 17th Test ... normal

50 days later—Dr. reported final test—still showing normal. He ordered a further supply of "Sug." It is the only thing for Diabetes.

Indiana +  
This physician, who admitted he was "an underdog," wrote "I was about to give up on this patient. The case proved obstinate. Desiring to help this unfortunate as well as convince the Doctor we sent the second lot urging patience. She was in a bad way and gave it up. The following delayed letter is the interesting and gratifying denouement:

"Some time ago, in a half-hearted way, I asked you for some of your treatment for a patient of mine too poor to buy it. You were kind enough to send it, and I turned it over to the patient. She was in a bad way and knew it herself, and took it religiously. At first she felt better, but there was very little lessening of sugar output. You and she believed in it and she took a second lot. You were kind enough to send. This morning I examined another specimen of urine from her and not the slightest sign of sugar, and she feels better than she has for years. Of course, she followed your diet list to the letter—has eaten gluten bread all this while. I am more eager to send you this report because I have been so indifferent about myself. I had not even examined her urine for months until her daughter brought the sample, saying her mother was so much better. I reported this case to our Medical Society. This is N. and shall certainly use it in other cases."

Missouri ++  
I have been so indifferent about myself. I had not even examined her urine for months until her daughter brought the sample, saying her mother was so much better. I reported this case to our Medical Society. This is N. and shall certainly use it in other cases."

First Report—Still some Sugar but in smaller quantities—sometimes none at all—headache better and think I am gaining in strength.

West Virginia ++  
Dr. writes—"I am a Diabetic, 52. By strict diet am holding it at 2.5%."

First Report—"Improving. Check for order."

Second Report—"Am so much improved am almost well but am afraid to quit the treatment yet. Am enclosing check for one dozen more."

Pennsylvania ++  
Dr. writes—"Patient 62, have had Diabetes 4 years. S. G. 1030, sugar 2 1/2%. Please send."

First Report—"Must say I am improved. Sugar grav. lowered and amount of sugar lessened."

Massachusetts ++  
Diabetes, Female. Has been at Hospital on Allen treatment. Age 45, S. G. 1034, Sug. 3.3%.

Six months later—"Some time ago I wrote you for your treatment for Diabetes Mellitus. Patient was in a serious condition, the fact she had had treatment at a Boston hospital under a good specialist. She took the treatment as directed and after the past month on repeated tests both by myself and attending physician we are unable to find even a trace of sugar. (The Doctor closes with reference to live cases, one of which appears critical that he is ordering for.)"

Illinois +  
"Diabetes, age 48, S. G. 1035, Sug. 3.8%.

66 days later. "Am greatly surprised. In two weeks sugar dropped to 0.4% which I could hardly believe but was more astonished on patient's last test. I could not even find a trace of sugar and was surprised to learn he had gone to work the first time in 6 months. Will have other cases on it soon."

3 mos. later—"Patient got out of the treatment, and is not so well. Duplicate as soon as possible."

San Francisco  
Diabetes Mellitus—Arizona Physicians had fought the disease for years. It developed to the gangrenous stage which took the patient to Los Angeles. Failure followed there also and he came to consult physicians here. Both feet were black. The toes were sloughing, the bones protruding, and so offensive the physicians could hardly stay in the room.

It was the opinion of the House Surgeon in the Hospital where the physician placed the patient that one of the legs would have to be amputated at the knee. The physician decided to try to save both legs and put him on the Diabetic agent to render the urine free of sugar. It was eliminated in due course when the gangrenous sloughs ceased to spread and a well-defined line of demarcation was developed. The dead tissue was removed daily after cleansing with stimulating antiseptic lotions the parts were packed with sterilized gauze wet with Revivine. (This physician reports at times the direct application of raw lean steak getting fine appropriation and stimulation.)

The protruding bones were cut a number of times. The response was slow but the date this was written both feet were healing showing healthy stumps just below the instep. The Doctor favored us with radiograph of the above case. It will be seen the right foot has healed and the left is beginning to cover, as follows:

Final Report—60 days later—Both feet have healed and the patient has left the Hospital. Sugar and Symptoms negligible.

San Francisco  
The Physician who reported the above case specializes in Bright's Disease and Diabetes and has treated a large number of cases reporting that among them he has successfully treated more than a dozen cases of Diabetes that had developed gangrene. To show that the above experience is not rare we quote the two cases following reported by the same physician.

Decided, President of a local Corporation, had been treated for years and gangrene had finally developed. A foot and ankle were sloughing and the gangrene was approaching the knee when the case fell into his hands. He was taken to St. Winifred Hospital on Outer Street. Consulting Surgeons were called in. It was the opinion that the case needed operation. The patient was put on the Diabetic agent. Sugar gradually responded and on its disappearance the physician in the presence of the consulting Surgeons amputated the leg above the knee. Confirming the elimination of the sugar the wound healed and a few months thereafter the patient was out again. He was in good health two years when he suddenly succumbed to an apoplectic stroke.

San Francisco  
Reported by the Physician Patient (Mr. P.)—in extremis with Diabetes. The toes were sloughing with gangrene. Had been under treatment in one of the large Hospitals. The Specific Gravity was 1040 although there was very little sugar. The gangrenous condition was so serious that the physician felt quite uncertain as to the outcome but he put the patient on the Diabetic agent, which he aided with pancreatin and a reconstructive tonic. The feet were dark and cold. He put them in hot water to expand the arteries and the Specific Gravity fell to 1020. The gangrenous toes with peroxide, dressing them with gauze soaked in beef's blood. He did not get an early reaction and erysipelas set

in. He packed the leg in fifty per cent ichthyl with benzoin and in due course controlled this symptom. About three weeks thereafter the gangrene ceased spreading. In due course the sugar was eliminated, the specific gravity was reduced to the normal, and the wounds healed, leaving the great and small toe with nothing between. At last advice, two years later, this patient was attending to his business.

Illinois +  
The following case of Diabetic Gangrene in extremis ("patient a prominent retired official") is reported by a physician. (The patient's wife, who got such personal results that he decided to resort to this agent at what appears to have been a critical moment. Twenty days later came the following report.)

First Report—"Diabetes, age 40. Three weeks ago was in semi coma. Had lost 60 lbs. in weight, pulse so rapid and irregular could not count it, Sug. 5%, S. G. 988, many small localized skin areas of gangrene, 2 on right foot 1x2 inches with infection. These were dressed with moist alkaline depleting solution and your Rx with carbol. I gave in. Result: Sugar gone; urine neutral; skin healing rapidly; infection cleared up; mind clear, and he is feeling almost normal. Sounds foolish as 3 weeks' result."

Second Report—"As to that very serious Diabetic case he lost much of the covering of the lower and of the Thia inside the ankle. As the gangrene shows a line of demarcation I removed the gangrenous tissue keeping the ankle in a moist dressing and on the first day that the wound was bacteria free started on blood dressing to encourage healing. The foot is nearly healed and the patient is beginning to get around and will go to his country home for the summer. Have been giving a subcutaneous injection every other day of 1 1/2 gra. Sodium cacodylate. I see no reason why he cannot live on for many years."

Missouri ++  
Diabetic Gangrene—Age 46. "Am practically bedfast; four toe nails have come off. Hope the gangrene will stop before I lose toes. S. G. 1045. Sugar 8%. Polyrria Gravid. No thirst. Had lost 100 pounds. Excuse pen, am in bed trying to write."  
60 days later—"Sugar a trace. S. G. 1030. Polyrria greatly reduced. Thirst normal. Stomach empty. General condition improving. Well. Improvement in every way—all far in advance of my expectations. Am sending for another course."

Vermont +  
Diabetic Gangrene. "Expect to amputate soon."  
First Report—30 days after beginning the treatment it had not halted the gangrene and patient was amputated above the knee. "Patient made no improvement and is now in good condition. Has not felt as well for years. Am allowing a little bread and baked potato. Sugar-free food is not eating. I intend to continue to use it as long as results are good."

(Note—One of the most successful specialists here does not operate when sugar is out, even if it takes several months.)

Chicago +  
Physician sends for the treatment for a patient, age 67, with gangrene. S. G. 1038; sugar 8.1%.

Without further mention of the gangrenous symptoms one month later the physician reported "Sugar drops 50%. S. G. 1030. Sugar-free food is eating. Diabetes cases. Give price in quantity lots."

Missouri +  
Male—age 63. Diabetes of 5 years' standing; gangrenous ulcers on toe and leg. Third test—Sugar 5% and polyuria reduced. Gangrene and physical condition improving. Am well pleased.

Illinois ++  
Diabetes, Female, age 46. Mother died of diabetes.  
1st Report—"Symptoms ease better."  
30 days later—"S. G. 1020, no trace of sugar whatever and feeling better. The first 20 days of treatment I did not diet. The second 20 days no restrictions as I wanted to test the virtues of the treatment. I find to day a perfectly normal urine. How about

continuing." (Experiences suggests continuance for 2 to 3 months, last month on half doses—J. J. F. Co.) (The Dr. followed with orders for four patients.)

Michigan +  
"Diabetes with gangrene of both feet. Sug. 3.5%. Female age 62. My treatment, gave no results."  
First Report—"The 2nd and 5th toes of right foot had sloughed off and foot in bad condition when treatment began. Sloughing has now ceased. Foot in good condition. Wound of amputation has healed. Patient is beginning to put foot on the floor and is feeling much better every way. Sugar at this date 1.5%. No opiate or other medication required."

60 days later—Dr. writes "patient still weak but gaining right along." He adds "the foot is now healed" and encloses the following photo showing the scars.

Let us here add to the tender to Physicians that we will send a 60 day course of the Diabetic Agent to every Physician receiving this issue who is treating a charity case of Diabetic Gangrene.—J. J. F. Co.

Massachusetts ++  
Patient, a member of the Doctor's family S. G. 1030. Diabetes with gangrene. Toes amputated due to Diabetic gangrene—wound does not heal. First Report—"Sugar reduced" third gone, with very decided physical improvement; the gangrenous toe amputated 6 weeks ago. Sugar not healed but I think it has started." Sugar index to date is—

At start S. G. 1035 Sugar 3%  
14 ds. later " 1027 " 1 1/2%  
14 ds. later " 1017 " 1 1/2%

Second Report—"No Sugar for 15 days and too all healed except an area about the size of a split pea. Patient is now within 6 lbs. of normal weight and is about his daily work. I used the beef juice dressing with good results."

This physician reports having given part of the treatment to another patient who was also gangrenous and in an extreme condition. The sugar was reduced over half the first two weeks but patient suddenly succumbed. The Doctor adds he did not diet properly, nor follow instructions and he believed he became septic from the gangrenous toes.

Newark, N. J. +  
"Diabetic Gangrene, female with Gangrene of left foot. S. G. 1040; Sugar 5%; alk. 1%. Great thirst, heavy loss in weight, very weak."

40 days later—"The gangrenous patient is certainly doing well since taking the treatment."

40 days later—"S. G. 1020; Sug. none; third gone; gain in weight 35 lbs. Toe amputated, marked improvement."

Month later—"The gangrenous Diabetic is doing finely—able to walk on the foot."

Indiana +  
"I have several cases of Diabetes under treatment. Would like to try it out." We sent treatment for his most critical case. "A poor woman, 59, with gangrenous Diabetes. Sugar heavy, perforating ulcers on feet, one entire leg having sloughed off."

30 days later—"Decreased general condition improved. Gangrene has been checked and all but two of the places have healed but I don't want to be too sanguine yet. Check herein for treatment for another case "heavy with sugar."

Philadelphia ++  
Physician's mother. 72. Sug. 4.17% 1 weight, with gangrene. Have amputated



toss and dry gangrene now threatens both legs. Has suffered terribly for two years.  
40 days later—"Will send laboratory reports soon. As to weight, I have known of it sooner would have saved all this suffering and two toes. You can take my word for it I will never treat a case of Diabetes in the future without it. I will swear by it now."

#### Kentucky

**Female**—Diabetes with gangrene. (Critical)  
40 days later—"Laboratory report today shows great reduction in Sugar (trace) and the gangrenous area is healing fast, one that the Surgeons and several aged amputees was only show for life but the patient was not physically able to stand it."

#### Indiana

Dr. writes "I have 2 Diabetics, heavy with sugar (over 6%) excessive polyuria and thirst, heavy loss in weight, very weak."  
First Report—"Sugar reduced 30% in one case and nearly 60% in the other. Polyuria halved in both cases; thirst, scarcely now now in one case and much improved in the other. Both are much stronger and have gained in weight 5 and 30 lbs. respectively—greatly improved."

We wrote asking if he did not mind 3 instead of 30 lbs. gain in weight in case 2, you, the Dr. replied "I mean to say he has gained 30 lbs. not 3. Never saw such improvement."

Third Report—"Thirst is virtually gone; less urine, and seldom have to get up at night; sugar much less; S.G. 1026 and 28 respectively."

Fourth Report—"Case 1 improvement continues, patient 2 is at work."

#### Alabama

This Physician put two cases of Diabetes on this agent (due to the results obtained in a case in his family). Two months later he reported as follows—"One case of Diabetes cleared up at once. The other proved more obstinate. The sugar disappeared but is now back, due as I have good reason to believe, to the patient and not the treatment. Have him again on treatment. Patient stopped too soon. Treatment and diet should be continued 2 to 3 months after sugar and symptoms disappear."

#### Iowa

Your records will show you sent me 1/2 doz. of the Diabetic agent. I divided it between two patients.

(One)—Mrs. S.—Sugar 2.83%; thirst is gone; elimination nearly normal in quantity; gain in weight 12 pounds. Two examinations by highly competent pathologists now show no trace of sugar.

(Two)—Judge—O. Excretion was 126 ounces; sugar 1.4%; 30 day urinary excretion showed 1.4%; total urine 74 ounces; gain in weight 2 pounds.

#### Minnesota

"The first case, male (56) has gained 15 pounds; sugar reduced to a trace. Codeine and the usual diet has failed."

Second case—female (50) was in a bad way—high sugar; frequent urination; great loss of weight. All cardinal symptoms are abating. Has gained 8 lbs. and prognosis "very favorable."

#### Florida

In both cases (Diabetes) it acted fine—yet one discontinued as soon as good results were obtained and now I hear is as bad as ever. Check herein for another course—rush.

#### Michigan

Physician, State Med. Exr. for large Fraternal organization, orders for two cases Diabetic agent.

60 days later—"Believe both are improving. Duplicate with bill."

40 days later—"Have started the third Diabetic case and now on the third unit with decided improvement. The two old patients continue to improve. Rush duplicates for all three. Check herein."

#### Chicago

Female, age 50, S. G. 1035, sugar 3%. 60 days later—"S. G. 1025, sugar a trace, polyuria and thirst reduced, strength improved. Very satisfactory results."

#### Chicago

Diabetes, age 55, S. G. 1032, Sugar 4% with skin eruptions. Thirst and urine excessive (2 gallons daily).  
30 days later—"S. G. 1025, Sugar 2%, urine reduced one-half. Thirst less, skin eruptions have cleared, strength improving and general appearance much better. This is wonderful and I believe it will save my patient's life. Have started another case and it is improving."

#### Minnesota

"Sugar 8%. Anxious to try your treatment."

First Report—"Patient on the fourth week of your treatment and is much improved. The sugar is down to 5% and she feels much better all around. One of the first things she noticed was a marked improvement in her dizziness and also that her eye sight is much better. Can now thread her own needle, something she has not been able to do for a year ago. Am much interested. Quote in doz. lots."

#### Michigan

Female, Sugar 2%, eye sight failing. First Report—"Sugar 2%, eye symptoms are improved." 2nd Report—"Sugar 1 1/2%." Patient steadily improving, altho yet quite weak.

#### Brooklyn, N. Y.

Physician writes his sister, age 50, has a critical case of Diabetes. Sugar 3 1/2%, Polyuria 112 oz., excessive thirst, constant headache, loss of weight 28 pounds, great weakness and general lassitude. Patient has suffered four years. Have tried nearly the whole Pharmacopoeia being also a Ph. D. 21 days later—"I cannot express my sincere gratification at the results. They are astounding and if the progress keeps up you, as we hope, she says she can never repay you. Polyuria was worst feature, 112 ounces a day you can see how gratifying the results have been. Polyuria is now 56 ounces, the sugar less than half, thirst gradually lessened, strength is improving, I cannot express my appreciation. I have told a number of my colleagues and they are astonished as they all said no possible hope."

Due to the critical condition of the patient and the fact that the usual means had been exhausted we wrote the Doctor we wanted to see him eliminate the remaining sugar as a further demonstration to his colleagues who doubtless still believe there was no hope and we sent another 60 day course to that end.

60 days later—"Specific Gravity is now 1022; sugar trace, thirst negligible. Has gained eleven pounds. You speak of it as nothing unusual. I beg to differ. After all that has been tried without result it is astonishing. She does not know what to make of it and continually asks for assurance of my part that it will last." (To comfort her we cited two cases to the Doctor, one of which was in a critical condition, in which sugar and symptoms were eliminated in 1901. Both were active at last advices nearly 20 years later. In both sugar reappeared, in one several times, but was eliminated by a short return to the treatment.)

#### Kansas

Patient, age 62, has been operated on for Diabetic cataract. Sugar 5% with thirst and losing weight. Referred to me for treatment.

Forty-two days later—"Sugar has disappeared, strength much better, eye is healing and can see. Physical changes improved." "The result is marvelous, better than I hoped for." "The Dr. reorders clothing—"I want it at hand after this."

#### Chicago

Female, 59, has been suffering with Diabetes for years. S. G. 1033; sugar 4% with a trace of albumen. Able to be up but at times not so well.

50 days later—"Am pleased to report that the albumen has entirely disappeared, sugar is now 1 1/2%, specific gravity 1020 and she is greatly improved in her general health altho she has not followed the diet scheme as closely as she should. Am well pleased and trust the results will be permanent."

#### Texas

Dr. (Company Surgeon St. L. & S. W. R. R. Co.) writes—"I am 60 and have had Diabetes 3 years. Weight has dropped 200 to 155 lbs. City physician says I am old and was one of the worst cases he ever saw. If you think your treatment will benefit me I will appreciate it if you will send it."

First Report—"S. G. 1022, no sugar. Neuritis is almost gone and strength improving every day. Am stronger than at any time for the last three years."

#### Mississippi

Physician Dist. Surg. Ill. Central R. R. Co. writes for a patient (a relative) age 60. "Acute Diabetes."

40 days later—"Cannot give the % of sugar at the start except to say it was heavy. To my surprise and gratification, two examinations show no sugar at all. Your preparation has proved its value."

#### Indiana

Diabetes Mellitus 10 to 15 yrs. standing; Sug. 2 1/2% with alb. now showing at times; dim vision; much neuritis. Have tried Odo. Gold, G. Trappagen, etc.

First Report—"Sugar lessened and patient feeling so much better I allowed him a trip to Illinois."

#### New Jersey

"Please send for a case of Diabetes. Other methods do not prove very encouraging."  
First Report—"Arrived 2 broken. Gave the rest and he is improving. Duplicate with bill."

Second Report—"There was not much decrease in sugar till the 6th week. Since then there has been a marked change. Last test S. G. 1020, sugar just a trace. Marked improvement in general condition. Am pleased with the results, and will use it in all cases hereafter."

#### New York

"Patient, myself, age 54, Sugar 3% and upwards, persistent, complication—severe caruncles. Having heard from a brother physician of the efficacy of your treatment would like to try it out."

40 days later—"Just a line to say it is working out nicely. Sugar has almost disappeared."

30 days later—"Apparently well, still on the treatment, but in reduced dosage. Permit me to thank you and congratulate you on your treatment."

#### Vermont

Sugar "rather plump in spite of a fairly restricted diet. First Report—"Practically sugar free." "The patient has gained weight and shall try it further." (This physician has important official status in his State.)

#### West Virginia

This physician put 4 Diabetics on the Diabetic agent.

40 days later—"First advices on the four cases as follows:—  
Mrs. H.—, age 53. "Very anemic, had given up in despair when she came to me." Sugar drops 50%, polyuria and thirst greatly reduced, pain has disappeared, marked improvement and patient again doing her own housework."

Mrs. J.—, age 52. Sugar 3% drops to a trace, polyuria much less, burning relieved and patient much stronger, pains almost gone.  
Mrs. D.—, age 44. Sugar and polyuria reduced one-half, patient's strength much improved, burning pain greatly relieved.

Mrs. B.—, age 47. Sugar has disappeared, burning and thirst relieved, polyuria about normal and strength much improved.  
I am delighted with the results so far. It is bringing me business. Only one thing wrong—you are so far away. I have two more cases impatiently waiting last order."

#### Brooklyn, N. Y.

Was in Med. Corps, U. S. A. and discharged as permanently and totally disabled due to Diabetes. Thirst, strict diet to sugar in urine for over a year but symptoms and sugar in blood persist. My condition does not indicate any promise. The prognosis looks bad. If you can give me even a little assistance it will be a tremendous help."

50 ds later—"Am much stronger, and better vitality, gain in weight 5 lbs. (had lost 70), indigestion greatly reduced but blood sugar has risen."

30 ds later. Am nearly out of capsules and would like to continue, apparently benefited but blood sugar is a trifle higher. Send capsules with bill.

14 ds later—"There is now a decline in the blood sugar of 1/4%. Each 1/4% reduction makes it possible for 10 to 15 grams more carbohydrate in my diet so you can see even a small improvement leads to a very great alleviation in symptoms and diet. Also, I am well assured that my improvement in general strength is real and not a temporary symptom."

#### Illinois

This Physician ordered for his own case of Diabetes, "loaded with sugar", and a patient (Mrs. O.) Diabetes 4 yrs. standing. Sugar 4% and of whom he writes "It is hard to get her to diet."

First report 30 ds later—"Dr. reports sugar has dropped half in his own case and polyuria and thirst are less. He writes 'It is hard to get her to diet.'"

#### Pennsylvania

This physician sent for the Diabetic agent for a case under the age limit of our offer (45). However, we sent it expecting it at any rate to reduce sugar in most cases. He later reported "no very perceptible change. We asked him to select a case above 45 and we would send a second course to show him he could get results. He accepted and we sent it."

We now have the following report:—"Beg to say that I used it on two other cases of Diabetes. They both reported good results and have ordered more. Both showed marked sugar content so there is no doubt about the diagnoses."

#### Nebraska

This physician writes: "Have carried sugar for four years—now one per cent. Dieting continually—am 40 years old."

60 days later—"No sugar. Sugar-free today—60 days still on the treatment. Many thanks."

#### Indiana

Diabetes, 4 yrs' standing. Age 49. Sugar 10.7%. My brother, age 51 (address herein) also has Diabetes. Send him treatment C. O. D. and I will prescribe it."

First Report—"Have been away and unable to try your treatment. I am anxious to try it. My own case, several years' duration, 53, sug. 2%. S.G. 1030 to 1035. Loss in weight, weakness, nervousness, etc."

70 days later—"Sugar now S. G. in normal range. Am increasing in weight, am stronger, and feel better in every way. Wonderfully improved."

#### Missouri

I am a Diabetic myself (age 48) and wish to avail myself of your offer.  
First Report—"Sugar test is light, only occasional. Am feeling fine and am much encouraged since commencing your treatment. Can now use a liberal slice of bread at each meal without showing sugar. Spec. Grav. around 1018."

#### New York

Disab. Sug. 6 to 10%, age 66, duration four years.

30 days later—"Good results to report, s.g. 1020, sugar not even a trace, feeling much improved."

#### South Carolina

Diabetes, in my family, age 45, S. G. 1040, sugar 5%, marked polyuria, excessive thirst, marked weakness.

40 ds later—"S. G. is 1023, sugar a trace, polyuria and thirst moderate, strength improved. 10 lbs. gain in weight. General condition improved."

#### Pennsylvania

This physician was himself a Diabetic and two years ago was on injections, 15 M. three times a day before meals. He wrote, "I want to get away from them." He asked for our medicine and changed to this treatment. He became sugar free and prescribed it for patients with similar results and that they are not few may be known from this. In fact, this was written he had prescribed nearly \$500.00 worth of the Diabetic capsules. He states that he "stops injections on starting this treatment." In answer to a question as to what percentage of failures he had had in patients over 45 whom he has put on this treatment he replied, "I have not had any that adhere to diet."

#### New York

This New York Physician was evidently not quite ready to believe he could transfer Diabetics from injections to mild, internal treatment and reduce sugar and symptoms for his first order he wrote "It would be glad to prove your statements true."

50 days later came his re-order, closing "I am treating three cases with remarkable results."

A month later the Doctor's third order reported the practical recovery of all three and a fourth case beginning to respond. He asked the Doctor if his patients had been on injections for three years.

#### California

A California physician, who has prescribed several hundred dollars worth of the Diabetic capsules, in answer to a question writes, "I discontinue injections on beginning with your Rx. Still getting splendid results."

#### California

Physician closes his eighteenth order, "It sure does the work." (His first patient on this treatment was his own daughter.)

#### New York

Doctor writes, "I have used your Rx with good results in several cases. Send me your latest literature."

#### Iowa

With his ninth order this physician writes, "My cases are doing nicely."

#### Illinois

With his thirteenth order the doctor writes, "Having good success. Herry."

#### Illinois

With his rush order for his fifteenth treatment this physician writes, "Have two cases now and both are almost sugar free in less than a week."

#### Pennsylvania

This physician closes his order for his nineteenth nine-day prescription as follows: "I am getting remarkable results." (He is in a family of Diabetics and patients are evidently going to him from a wide range.)

#### Illinois

This physician got such results from his first treatments that he writes he is thinking of limiting his practice to Diabetics and asks "Can I be of any quick service?"

#### Pennsylvania

With an order for one dozen more of the nine-day prescriptions this physician writes, "Have a number of Diabetic patients. Have tried your Rx on them and it has been a charm." Forty days later—Doctor duplicates his order, closing, "It is ideal."

#### Mississippi

Diabetes—S. G. 1040; Sugar 5%; polyuria excessive; great thirst, marked weakness; with cough and expectoration suggesting T. B. Has lost 30 lbs.

46 days later—"S. G. 1016; sugar at times none; polyuria less; cough relieved; strength improved; cough relieved; gain in weight 5 lbs. Marked improvement—has gone to work."

#### Texas

Patient—Physician, age 40 confined to bed in P. S. Hospital. Sug. 6%. Polyuria, 3600 to 4000 c.c., great thirst, less in weight 75 lbs., very weak, swelling feet, neuritis, considerable loss of eye sight. Consulting physician advised "Has been one of the best men in the U. S. without improvement."  
30 days later—"Sugar none, urine 1200 to 2000 c.c. Thirst none, has gained 4 lbs. in wt., strength improving, eye sight better."

#### California

I am 50 and have had Diabetes 3 yrs. When I diet carefully I can now S. G. 1030, sugar 3%. At times when practice overworks me it runs as high as 1040 and 8% sugar. (Unusual thirst, polyuria and loss in weight.)  
30 days later—"S. G. 1022; Sugar, a trace, Polyuria and thirst gone. Strength improving."

#### Illinois

This physician reports close attention to results in three cases of Diabetes on this treatment. The first one a ten year range up to 1050 S. G. 15 lbs. lost. The second he has recovered. The other two are dragging down both sugar, and albumen to a trace. It is remarkable.

#### Michigan

First Report—"Sugar 8%."

Second Report—"Much better—will prescribe. S. G. 1033. Sugar 11%. Polyuria, extreme thirst."

2nd Report—"S. G. 1023. Sugar 5%—Thirst and polyuria much less, other symptoms modifying—and on same diet."

3rd Report—"Got out of the treatment and found third and fourth patients returning. (In return to this agent is again improving.)



## Iowa

This Physician sent for a trial order for 3 months later. "I had helped." Three mos. later—"please duplicate—am well pleased and wish to go on."

## New York

Sugar 6% with Pruritis Vulva. Have had her on Diabetic diet with local treatment "with very little improvement."

First Report—On receipt of your preparation placed her on same at once. With Phenol, Menthol etc., the Pruritis cleared. There was general improvement. The sugar promptly decreased to 3% and the Pruritis cleared up.

## Virginia

Physician writes for treatment for patient 40 years of age with Diabetes; S. G. 1030; sugar 2 1/2%.

First Report, "Am glad to report gratifying results. Sugar has been reduced from 2 1/2% to 1% and improvement continuing in every way."

## Indiana

A failure that a little more patience would probably have averted, and the interesting aspect as reported by an Indiana Physician.

Patient—age 45—sugar 4 per cent. The Diabetic agent reduced the Specific Gravity from 1032 to 1020 the first week. But, as the patient grew weaker it was discontinued. It commonly requires 2 to 3 weeks for emaciation to begin to modify, hence, more patience was required than was shown here. The first week's drop in Specific Gravity (The normal) was much earlier response than usual and showed that the sugar absorption was under way. We wrote the Doctor accordingly and advised if the patient still objected that he give the remainder to the first poor Diabetic that came his way.

Sequel—5 months later—"I gave the balance of the treatment to a poor woman age 58 suffering with Diabetes. It is doing her as much good that it not too expensive I will buy one-half dozen and present it to her. Please quote." (Observed.)

## Salt Lake City

Diabetes—Sugar 5%. 60 days later—Patient improving—check for another supply.

60 days later—Steady improvement—check for another supply.

## Missouri

Sent a course to this physician for a case in his family, age 48, sugar 3%.

First Report—"Improving—sugar 1 1/2%. (With order for another course.)"

Second Report—"The two cases of Diabetes have improved so much that we do not need my services. (The Dr. encloses order for 2 more cases.)"

## Florida

My own case—both sugar and alb.—average 5 years duration.

30 days later—"Am feeling much better. No sugar for 10 days although I am eating some carbohydrates. Polyuria has decreased and the thirst has disappeared. Only a trace of alb. at times."

## Illinois

Doctor writes—"Have a case of Glycosuria on which I would like to try your treatment."

(Urine this enclosed shows Sugar 6%.)

1st Report—"Sugar trace only, patient improving."

## Illinois

Dr., 43, writes—"Sugar 3%, a symptomatic case."

1st Report—"On treatment a week. No change."

2nd Report—"Sug. drops one-third, a.g. 1024. Feeling well."

Month later—"Sug. trace to 1 1/2%, s. g. 1015 to 1025. C. O. D. another course."

## Buffalo, N. Y.

Dr. writes—"I have Diabetes in my family."

90 days later—"Patient has taken the half dose, with the most gratifying results. Send one doz. more, 6 for above and 6 for a patient."

## San Francisco

Diabetes Mellitus, sug. 3%.

Report—"The treatment reduced the spec. grav. and sugar in the cases treated in my practice as well as in my own case and I do not hesitate to recommend the treatment with the medicines in the Materia Medica as worthy of trial and consideration. I consider it has been a great factor in the longevity of my life. In my own case the craving for sugar reduction of the sugar the physical symptoms correspondingly diminished."

## South Dakota

So. Dak. Physician, "are 46, sug. 2 1/2%, resting in Southern California."

First Report—"Must admit I began with little faith. However as I gradually tried one forbidden food after the other without a reaction to Fehling's test my doubts were overcome. I encourage you to try it. I put in your Rx is actually a Diabetic medicine. Will prescribe it in S. D. on my return." (In our experience the return to mixed diet was two months to soon.)

## Nebraska

Physician writes—"Am treating several cases with your Rx with excellent results."

Referring to one, he writes—"He was rendered sugar-free the third month. On advice of a kind relative he drifted to a sure-cure Doctor. He came back 2 weeks ago worse than ever and willing to get down to business again."

## Oregon

"I used your Rx in a case of Diabetes, urinalysis at start showing 3.5%. In 2 months not a trace."

## New York

A case that failed when apparently well in hand illustrates the necessity for persistence in diet and watchful control, and is presented due to the careful record that was kept. The patient (former President of the State Board of Health, and one of the leaders of New York) was at the end of a long struggle with Diabetes and went to San Diego in an effort to prolong life. Was so weak only went out in the park occasionally on the arm of a relative.

Response in both sugar and symptoms was very slow but so definite that the sixth month to a day after the doctor left the Doctor came to San Francisco and called in person. He was in his vigor and stated that he intended to return to practice. The sugar index to that date, as shown by the Wassermann reports about three weeks apart, was as follows:

Sug.	S. G.
5.50%	1027
3.60%	1022
3.00%	1020
3.20%	1020
3.00%	1018
2.58%	1018
1.50%	1010
1.08%	not stated
0.97%	1011

We asked the cause of the sudden increase in sug. and spec. grav. the third month. The Doctor stated that he was advised by a specialist advised milk and egg-oog and he consumed 3 qts. daily. But he had to abandon it when the sugar immediately decreased.

(The Doctor is consulting Physician (a relative) called to say that he was feeling so well he came to San Francisco and probably took too many liberties with the diet for his return advice immediately set in with a fatal termination. (The patient was in his 74th year).)

The attending Physician stated that the sugar and symptoms had so definitely responded to the treatment that it had resulted in a decision to go East and specialize in Diabetes.

## Illinois

This Physician ordered for two cases Diabetes. With his third order he reports—"I am getting splendid results. Both cases, female, was practically in bed and are now up and doing as much work as ever, and gaining in flesh. Both specimens normal a.g., three pints in 24 hrs. But on standing a few hours test gets to be trace of sugar. Hence check for two more treatments."

## North Dakota

Physician writes from a Hospital of which he is in charge, stating that a brother and sister have inherited Diabetes, one of 5 years and the other of 12 years development.

60 days later—Both report progress with reorder in each case.

The Doctor reports both improved and orders for a new case closing. "I know of nothing better than your treatment."

## Illinois

Physician writes—Am 64 and been afflicted with Diabetes two years.

50 days later—"Improvement in all symptoms. If I continue to do as well shall be well satisfied."

3 wks. later—"Am sugar free, s. g. 1020 and feeling better in every way. How soon can I resume normal diet." (Ans. below.)

3 wks. later—"Am eating fruit, still sugar free feeling first class. Check herewith for another treatment."

## Colorado

Dr. wrote "I have a case of Diabetes that does not respond to the regular treatment."

80 days later he wrote—"The sugar cleared up. I was out of town and patient got out of medicine and sugar returned. I put him on the treatment again and the sugar has cleared up. C.O.D. another course. When is it safe to stop?" (Ans.—from two to three mos. after sug. and symptoms have disappeared, taking the last month in half doses.)

## California

"Two years ago I used your Rx and was so favorably impressed that I now wish to try it in my own case (Diabetes). Where is nearest supply?"

40 days later—"Am greatly encouraged. No sugar for 10 days, itching has ceased, am sleeping better, less nervous, am gaining strength and a little in wt. My Diabetic cases will get your Rx."

## Texas

Diabetes—Patient member of Doctor's family.

First Report—"Urine reduced 20 per cent—sugar decreasing S. G. 1025, weight has increased 4 pounds. Duplicate with bill. Yours fraternally grateful."

## Colorado

"I have used both preparations with good results. Practically all have been helped. What I want to know is whether they are efficient after prolonged use. We have known of cases in which the only effect seemed to be amelioration of symptoms in which it was taken off and on for several years with only temporary results. In a typical case the report was 'It's not feeling so well without it.' The following from an Oregon physician also answers above—"My own wife was cured by the Diabetic agent for the last 10 yrs. and while it has not cured him it has prolonged his life and made him comfortable although he does not live right."

## Iowa

"I am sending you draft for reorder. I am out and hope you will push it along. Am just through the fourth week and have a specific gravity 1020 with trace of sugar. Had 1030 s. g. one month ago with abundant sugar."

## Illinois

Physician writes—"Am 52 and have Diab. myself."

60 days later—"I am greatly improved. I tried several things the past 5 yrs but nothing gave immediate and positive results like your treatment. S. G. 1035 is now 1025. Blood pressure 150 is now 140, and the swelling of ankles has disappeared. Was getting up three times a night, not at all now. Am much stronger. (The Dr. writes for two more treatments, one for self and one for a patient.)"

## Florida

Have a patient, refractory, would like to help if possible. Is refractory, S. G. 1032, sug. 4% albumen, neuritis, etc.

Month later—S. G. 1026, sug. trace only. Polyuria a slight less, neuritis not so bad.

20 days later—Last 2 exs. show no sugar. Have just put another case on it.

## Detroit

Diabetes—wife, 57, s. g. 1032, with sugar. 60 days later—Gave your Rx with the result that ere the half dozen were exhausted the urine had become normal from a 3% of sugar.

## Missouri

I have a boy 23, S. G. 1032, sug. 2%. Check herein for treatment.

We wrote that recoveries were so few in young cases of Diabetes we were returning his check, but were sending him a 30 day trial order, gratis, and if he did not have a favorable reaction he could then reorder.

2 months later—"Results have been good. Check herein for 60 day course."

2 months later—check for another 60 day course, no report.

2 months later—check for another 60 day course, no report.

3 months later—check for another 60 day course, closing. "How long would you continue after patient is sugar free?"

## California

Physician writes, am 45, passing 80 ounces, Sugar 4%.

30 days later—"Am improving but not as fast as I could wish. I gave one box to a patient. Her progress is marvelous and I wish to place her on full treatment. Check herein for same."

60 days later—"Am improving splendidly—no sugar for 2 weeks. Check herein for another course. Am also advising it for a patient in Canada."

## Connecticut

Dr writes—Have had Diab. 15 yrs. Have exhausted all ordinary forms of treatment.

Sug. 5% later—Sug. still 5% but urine and thirst are decreasing.

40 da later—I write you with much satisfaction. Last year with surprise there is striking improvement—less urine, sug. has dropped from 5% to between 1 and 2% and feeling more vigorous mentally and physically. Check herein for reorder.

## Texas

Diabetes—My own case, age 52, polyuria, thirst, etc.

45 da later—S. G. has dropped from 1030 to 1018; polyuria and thirst have disappeared, strength improved. Check for repeat.

50 da later—Still improving. Check for repeat.

3rd report—Am still losing weight, check for repeat.

4th report—am not losing weight now like I was. Am putting another patient on the treatment—male, age 86 yrs. Check for repeat.

## Pittsburgh

Dr. writes—"Forward two courses, check herein. Want it for myself. Last year it cleared me up entirely but now I find it returning." (Previous correspondence showed 12% of sugar with loss of vision predominant when starting the treatment.)

## Missouri

Diabetic, age 45. Glycosuria 3 yrs. Nothing he has taken would lessen the sugar.

60 da later—Sugar has dropped 25%, corresponding decrease in s. g. patient has gained 8 lbs. in weight.

## Kansas

Physician, age 45, with sugar, Dyspnoea and coma.

34 days later—"Sugar of 2% has disappeared; S. G. 1021; thirst normal; gain in weight 5 lbs.; strength improved; bloating has disappeared—appetite normal."

## Indians

First Report—Sugar 12.8%

Second " " 6.2%

Third " " 4.2%

Fourth " " 2.5%—Am 75% improved."

## Indiana

First Report—Sugar 5%

Second " " 4%—with good results."

## Illinois

First Report—Sugar 4.0%

Second " " 3.5%

Third " " 1.5%

Fourth " " 1.4%—Cramps less, less thirst, and gaining strength."

"Have two patients on the treatment. One is definitely improved; the other not much—does not diet."

## Illinois

First Report—Sugar 3.2%

Second " " .5%

Third " " none (Patient's case 30 years. Again regret to say we had but little confidence as to permanence in young cases.—J. J. F. Co.)

## Texas

First Report—Sugar averaging 8% 3 months later—"Due to critical illness in family, I made no report. The Diabetic Agent was only taken when I was nearly past going." Dr. closes, "Will say that only by working it have I been able to stay at my work."

## Oregon

First Report—S. G. 1036 Sugar 3% Second " " No reduction—discouraged.

The date of the second report showed the Doctor had been out of the Diabetic Agent several weeks and had had time to lose ground. We sent another 60 day course urging patience. Within 30 days thereafter he had recovered lost ground and sugar absorption was under way as will now be seen by the 3rd, 4th and 5th reports as follows:

Third Report—S. G. 1036 Sugar 1 1/2%—Change for better.

Fourth Report—Sugar not stated—"Am very much improved. Will prescribe."

Fifth Report—Sugar not stated—"My condition is greatly improving far beyond my expectations. Have prescribed it in another case with good results."

## New York

Female, age 45.

First Report—Sugar 6% "constant, with great emaciation and pains in extremities. Have a large practice and if it helps her shall be happy to prescribe."

Four weeks later—Sugar none. "Marked improvement."

## Chicago

Diabetes; Female.

First Report—Sugar 8%

Second " " 3%

Third " " 2%

Final " " none

## Washington

3 months later—check for another 60 day course, closing. "How long would you continue after patient is sugar free?"

Physician writes, am 45, passing 80 ounces, Sugar 4%.

30 days later—"Am improving but not as fast as I could wish. I gave one box to a patient. Her progress is marvelous and I wish to place her on full treatment. Check herein for same."

60 days later—"Am improving splendidly—no sugar for 2 weeks. Check herein for another course. Am also advising it for a patient in Canada."

First report on new case—no benefit.

## Chicago

Age 54, "Sugar 5.8% laboratory analysis. Have tried everything I know to get the sugar down. 30 days later—Sugar 1.4% and on same diet. Am much elated."

Later—Patient under severe mental strain, sugar up to 6%. Later—Sugar drops to 4%.

Later—"Sug. 2% still have no hesitancy in prescribing. It is proving all you claimed."

## California

Dr. writes he has three cases on the Diabetic agent, one in the congenital stage. Only the first had taken it long enough to report on as follows: "Sugar of 6% dropped a third the first 19 days."

## Chicago

First Report—Sugar 3%

Second " " 1%

Third " " 1%

## Ohio

Female, Sugar 3%.

2 months later—Sugar nil—"On the same diet."

## Indiana

Diabetes, Male. Usual treatment had failed.

First Report—Sugar 3%

Final " " none—much improved.

## New York

Diabetes, Female.

First Urinalysis—Sugar 4.1%

Second " " 2.7%

Third " " 1.9%

Fourth " " 1.9%

"Quote prices for my druggist."

## Missouri

Physician (conducting his own Sanatorium, had 9 1/2% of sugar and tried the Allen treatment for 18 months.

First Report—S. G. 1035 Sugar 5.6%

Second " " 1028 " 3.0%

Third " " 1022 " 1.9%—doing my share of practice and feeling fine."

Fourth Report—"Have been sugar free 30 days and have also a patient on the treatment."

Fifth Report—"I am fine and my patient is doing well."

## Illinois

Diabetes, 10 years' duration "Thirst at times (rightful)."

First Report—S. G. 1028—Sugar not stated.

Second " " 1028 " 1%—less."

Third " " 1022 " 1%—

"Much better." (As the leg cramps were obstinate, we sent another 60 day course.)

Fourth Report—60 days later—"S. G. stationary at normal. Not trace of sugar. The benefit is remarkable."

## New York

1st Report Quant. 6 pts. Sug. 3.4%

2nd " " 4 " 1.42%

3rd " " 4 " 1.42%

"Much improved. Believe in 2 months will be sugar free. Will positively prescribe."

## Indiana

Diabetes, 3 yrs. age 48, sug. 19%. First report—"no results," no details. Getting no further advice we reported it in these columns as a failure. Later the Dr. wrote he had taken the case, and this confidence as to permanence in young cases.—J. J. F. Co.)

Second report—much stronger and standing







JOHN J. FULTON CO.  
88 First Street  
San Francisco, Calif.

Dear Doctor:

As requested, we hand you epitomes of several hundred reports, the results of a demonstration to the Physicians of America having Diabetes themselves or in their families. See fourth page for Rationale and Ingredients.

It is so revolutionary and so hard to believe these results can be had through mild, innocuous, internal treatment that we are sending you by same mail, with our compliments, 1/4 Dozen Boxes (27 days' treatment) of the Diabetic Capsules, and if the patient is over 45 and will help with the diet and you have the usual experience, you can begin to look for the sugar and specific gravity to start down, in most cases, between the 10th and 15th days, followed shortly thereafter by decreasing polyuria, thirst, etc.

Kindly hold the 27 day treatment to one patient for it may happen that the sugar and spec. grav. will not begin definitely diminishing until between the 15th and 20th days. Again, cases often begin to respond as early as the 10th day.

The administration is simple (2 Capsules t.i.d.- p.c.), given alone if patient is merely on diet. Any troublesome symptoms may be treated just as if it was not being given.

As most of the so-called gluten breads have to have 20 to 30 per cent starch to hold together, we suggest substitution of the bran muffins (see brown card herein) for the item of bread in the diet. These are inexpensive, can be made at home, are very palatable and contain practically no starch, and, in our opinion, will aid you to get the desired results.

The treatment is divided into six nine-day prescriptions to keep the patient in close touch with the Physician, thus assuring attention to diet and detail that make for the best results. These Capsules are not stocked but are mailed to Physicians at \$6.30 per 54 day course. As it is impractical to open small accounts throughout the United States (we know of no State in which this agent is not being prescribed) in ordering kindly enclose check, or, if desired, pay the postman. While two treatments often eliminate the sugar (frequently the first accomplishes this result) we have found it best to continue the treatment for two months after sugar and symptoms disappear, giving the last month in half doses.

A diet list is enclosed in each box of the capsules.

Counselling patience and anticipating the usual response,

Yours very truly,  
JOHN J. FULTON COMPANY.

(b) The molecules of the phosphates, urea, etc., etc., that should be eliminated are:

## SOME FURTHER REPORTS - THE FIRST THREE CASES IN COMA

### TEXAS

Patient, 68, for whom I ordered this treatment, was in coma one week before I gave it to him. I brought him out with Insulin injections and put him on your Rx. Sugar has reduced from 5.50% to less than 3% and I want him to continue. He allowed himself to get entirely out. Check herein for another course. Later - with check for re-order the doctor writes "not sugar free but is in every respect much better." (This patient does not treat his doctor fairly. Although in the crises of coma at one time (usually the end) he does not take the treatment with sufficient continuity to completely eliminate the sugar and, in our opinion, will be in his physician's hands again in due course.) (J.J.F.Co.)

### KENTUCKY

Find check for Diabetic treatment. "Have patient, 59, getting worse. Wish I had it today. Rush."

Four months later - "My first order I am quite sure robbed the grave of my 59 yr. Diabetic of 15 yrs. standing. The treatment relieved her of every symptom, impending coma to sugar free, S.G. normal. After she got able to do all her housework I lost track of her but now she needs more. Duplicate at once. Am thorough convinced as to the value of this agent in Diabetes." (Another case of patient stopping treatment too soon - J.J.F.Co.)

### CALIFORNIA

This physician, specializing in Kidney cases, reported the following in person: "Patient, female, 35, in deep coma in the finale of Diabetes. Attending physician felt the situation was hopeless when I was called in consultation. I gave saturated solution of Sodium Bicarbonate by injection into the veins and thru the Murphy drip and injected a heart stimulant. Patient rallied and I put her on your Rx, with steady improvement". At date of report (a month later) patient making fine progress and physician anticipated her recovery.

### INDIANA

"My patient, female, 59, is doing so well I want her to continue. Her S. G. has been reduced to 1024 and at times she is sugar free; polyuria, thirst, etc. wonderfully improved. Have another case I want to put on it, hence check herein for two more treatments. Others are watching the progress of my cases and I am sure will want it soon."

### WISCONSIN

Physician divided first course between two patients. (1) age 65, seven years standing, S.G. 1035, much sugar, with pruritis and swelling limbs. (2) Age 63, S.G. 1034, strong sugar. 40 days later - "Both are improving - duplicate last order."

### PENNSYLVANIA

This physician closes his second order - "I used the first course on a man, 48, who has had Diabetes for years. Sugar disappeared the fourth week but I want to continue for a while yet."

### WASHINGTON

50 days ago you sent me a course for a Diabetic 73 years old. "It has done wonders for him. Check herein for another treatment. Rush - am in a great hurry."

### PENNSYLVANIA

60 days after his first order Dr. writes - "Herein check for two more Diabetic treatments. My patient shows improvement. Want first patient to continue and am starting another case on it."

### ILLINOIS

Doctor orders one Diabetic treatment rush.  
2 months later - Dr. reorders, closing - "I have used the first treatment and sugar has disappeared. I want to continue."







## DIABETIC GANGRENE

Diabetic gangrene has been considered a particularly hopeless aspect but reports like the following will show how definitely this symptom also is responding.

### CALIFORNIA

Physician reports a critical case of Diabetic gangrene sent to him from Ariz. Toes were sloughing and bones protruding. Consulting physician felt one leg would have to be amputated above the knee. Response was slow but about the 90th day the physician reported both feet had healed, sugar and symptoms negative.

### CALIFORNIA

Another reported by same physician. One foot had but two toes left and the physician felt uncertain as to the outcome. Response was very slow but about a month later the gangrene ceased spreading; later, the sugar was eliminated, wounds healed and at last advices patient was attending to his business.

### PENNSYLVANIA

Physician's mother, 72; Sugar 4.17 per cent, with gangrene.

"Have amputated two toes and dry gangrene now threatens both legs."

40 ds. later - "It is wonderful. Had I known it sooner, would have saved all this suffering and two toes. Take my word for it, I will never treat a case of Diabetes in the future without it. Will send you the laboratory reports later."

### MISSOURI

Physician ("in bed") writes: "I am the patient. Sugar 8 per cent. Have lost 100 lbs., toe-nails have come off with gangrene."

60 ds. later - "Sugar, trace; gangrenous foot entirely healed; improvement in every way and far beyond my expectations."

### ILLINOIS

Physician reports Diabetic, 60, was in semi coma. Sugar 5 per cent; gangrenous area on right foot.

60 ds. later - "Foot is nearly healed and patient is beginning to get around. I see no reason why he can not live on many years."

### MICHIGAN

Physician reports Diabetic with gangrene of both feet; Sugar  $3\frac{1}{2}$  per cent; two toes sloughed off. "My treatment gets no results."

60 ds. later - "Foot is now well. Patient gaining right along."

### NEW JERSEY

Physician reports female, with gangrene of left foot. Sugar 5 per cent; spec. grav. 1040. Toe amputated.

Month later - "My gangrenous Diabetic is doing finely, now able to walk."

### IOWA

Doctor writes - "Check herein for 54 day treatment for patient, age 60, with Diabetic gangrene."

60 ds. later - Dr. re-orders, reporting: "Patient had an ulcer on left foot for 3 yrs. and three ulcers on right foot for 6 mos., a piece of bone an inch long sloughing behind the small toe. All ulcers healed, patient still on treatment."

### KENTUCKY

Physician reports case Diabetes with gangrene so critical "the surgeons and myself agreed amputation was the only show for life but the patient was not able to stand it."

40 ds. later - "Laboratory report today shows great reduction in sugar (trace) and the gangrenous area is healing fast."

### INDIANA

Physician reports female; 59; heavy sugar; perforating ulcers on feet, one entire heel having sloughed off.

40 ds. later - "Sugar less, general improvement, gangrene checked - all but two of the places have healed. Check for "another case."

THE HISTORY OF THE

REPUBLIC OF THE UNITED STATES OF AMERICA

CHAPTER I

The first of the great principles of the American Revolution was the right of the people to alter or to abolish their government, and to institute a new one, when it should be found to be destructive of the ends for which it was established.

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## AS TO PATIENTS ON INJECTIONS

The development of glandular injections, now so generally used, was a valuable contribution to Medical Science and in cases of Acidosis and Diabetic Coma the reaction is frequently marvelous and almost immediate. But after the disappearance of this symptom and the cases run on into years there is a constant and growing desire in both physicians and patients to dispense with the injections and physicians are now successfully substituting this treatment which not only reduces sugar but does not have to be continued indefinitely. (About two months after sugar and symptoms disappear.)

In answer to inquiries from physicians who contemplate prescribing this agent with a view of discontinuing injections as to what the best practice is, let us present the following extracts from letters from three physicians who have had large experience with this treatment, viz:

Dr. S. - whose practice involves an unusual number of Diabetics (has had over 800 of the 9 day prescriptions) writes, "I stop the injections upon starting this treatment." To the question "What percentage of failures have you had in patients over 45 you have put on this treatment?" he replied - "I have not had any that adhered to diet."

Dr. H - who has gotten such gratifying results he anticipated specializing in Diabetes, writes, "As to patients on injections I discontinue them at once."

Dr. D - who has had over 400 of the 9 day prescriptions, writes, "I discontinue serum injections on beginning with your Rx. Still getting splendid results."

Wisconsin physician reports case of Mrs. B. Had lost 30 lbs, in 60 days. Condition deplorable. "I put her on injections three times a day. On receipt of the capsules I discontinued the injections and gave two capsules three times a day." Sugar 7 gms. per 100 C.C. of urine. Twenty days later was sugar free, gaining flesh and delighted. Order to continue.

An Oregon physician wrote "I have a Diabetic on injections. Want something can be given by mouth." The Doctor's next letter reports. "Sugar disappeared the third week, patient feeling fine." Now have another. Order for both.

A New York physician's reports on his first four cases, two of which had been on injections for several years: He divided his first order between three patients. His second order reported all three as getting "remarkable results." His next order reported all three had yielded and he was permitting them to widen their diets (in our judgement over a month too soon. J.J.F.CO.) and contained his first report on a new case transferred from injections.

A Texas physician reported fine results in what appears to have been a case in extremis. "Patient, 68, was in coma one week. I brought him out with Insulin and put him on your Rx. Sugar reduced 50%." With a later re-order the doctor wrote, "Not sugar free but is in every respect much better."

And a California physician who has successfully treated many Diabetics with this agent has stated to the writer that he has also given it and the injections to the same patient, decreasing the injections as S.G. and sugar diminished. The writer feels the procedure outlined by the physicians quoted above is not only simpler, more direct and more practical but some of the variations in the diets patients on injections at times require would, in our opinion, largely nullify the corrective tendencies of this treatment.



RECAPITULATION OF THE

The above summary of the proceedings of the conference will  
show that the object of the conference was to collect and  
gather up the scattered fragments of culture and  
to establish a basis for a more complete and  
systematic study of the subject. It is hoped that  
the results of the conference will be of service to  
the students of the subject and to the general public.

The conference was held at the University of California, Berkeley, California, from September 10 to 14, 1906. The object of the conference was to collect and gather up the scattered fragments of culture and to establish a basis for a more complete and systematic study of the subject. It is hoped that the results of the conference will be of service to the students of the subject and to the general public.



TRANSFERS FROM INJECTIONS AND OBSERVATIONS THEREON

PENNSYLVANIA

This Physician, himself a Diabetic and on injections, writes, "I took 15 M. t. i. d. before meals. About one year ago I started on your capsules and followed closely your diet. I am sugar free and a number of other patients I treated with them. I think they are the best thing known for Diabetes at this time. I stop injections on putting Diabetics on this treatment."

IOWA

The Doctor writes, "Am 51. Have had Diabetes 2 years. Am on injections. If you have something that will get away from injections I would like to try it." The usual 30 day demonstration was forwarded.  
Report - "I am 50% better since taking the treatment."

KANSAS

"Have a female Diabetic; on injections 2 years; is now totally blind. Would like to relieve her of the injections." We sent the usual 30 day demonstration. Report - "She is doing as well or better than on injections. Sugar has reduced". 60 days later - "Is on 2nd installment, doing fine without injections and is delighted."

MISSOURI

"I am treating three cases over 45. Would like to try something besides the needle if I can get results." Report on his 30 day demonstration - "Sugar has practically disappeared. Better in every way."

FLORIDA

"I have a patient to whom I have been giving injections for some time but does not respond as I would like; is very emaciated." We sent the usual 30 day demonstration. Report - The Doctor does not give the sugar decrease, merely reporting that "The treatment has done all you said it would and I am very much pleased."

TEXAS

"Am treating a Diabetic, age 49. Has taken many injections." Report on 30 day demonstration. "She is 50% better than she has been for four years."

WISCONSIN

Dr. reports case Mrs. B - 70 grs. sugar to 100 c.c. of urine with distressing symptoms. Had her under injections three times a day until the demonstration was received. Discontinued the injections and instead gave two of the capsules three times a day. Twenty days later urine showed entire absence of sugar. "Patient gaining flesh and delighted."

OREGON

Diabetic age 75. Doctor writes, "I have him on injections. Want something that can be given by mouth." Sent 30 day demonstration. Report - "Sugar disappeared in less than three weeks, patient feeling fine."

NEW YORK

Among this Physician's cases were three Diabetics, "two of which had been on injections for years." In due course, following the demonstration and an additional order, he reported all three as getting "remarkable results." And on a later order reported all three had yielded and he was widening their diets.

-----  
In cases transferred from injections it is important to bear in mind that such patients at times have had to have such things as orange juice, chocolate, etc. to overcome unpleasant reactions and some feel they can continue same with this treatment, but such liberties largely nullify its results. Hence, to get satisfactory results, the diet with this preparation and the substitution of the starchless bran muffins for bread are strongly urged.

MEMORANDUM

TO : [illegible]  
FROM : [illegible]  
SUBJECT: [illegible]  
[illegible text continues]

RE: [illegible]

[illegible text continues]

DISCUSSION

[illegible text continues]

CONCLUSION

[illegible text continues]

REMARKS

[illegible text continues]



## SOME INTERESTING LATER REPORTS

### CALIFORNIA

This Physician reports recovery in another case of Diabetic gangrene. Case P-n. Leg so involved his first Physician urged amputation. Rx was given with daily cleansing of the gangrene areas. This Physician had previously reported recovery in case of P-h. Toes were sloughing. Two had disappeared. So serious the outlook was uncertain. Patient was discharged the 5th month.

### MICHIGAN

With his 3d order, this Physician writes - "I wish to express my appreciation. I have used your Rx in two very severe cases of Diabetes. They are both sugar free now and feeling fine."

### PENNSYLVANIA

A reorder from this Physician closes - "Had two cases Diabetes on your treatment a year ago. Made a success in both cases. But now, one comes back. Maybe she did not continue long enough. (Altho the treatment is advised 2 to 3 mos. after sugar and symptoms disappear, last month in half doses, too many stop at once on getting comfortable.) (J.J.F. Co.)

### IOWA

Doctor's first order - female 56. 40 ds. later "Patient is responding. You will hear from me again." 60 ds. later - "Doing fine, wt 164 lbs s.g. 1018." Later - The Dr. closes his 6th order - "It certainly eliminates sugar under careful diet in short order."

### NEW YORK STATE

Two months after the first order the Doctor ordered for his second Diabetic closing - "My first case has made wonderful progress. In fact I consider her cured."

### NEW YORK STATE

"In 1924 you sent me treatment for a very stubborn case with both sugar and albumen. The patient (chief of Police) had lost 40 lbs. He is to all appearances cured. I now have another stubborn case - send C.O.D."

### VIRGINIA

Physician writes - "I treated a man (64) with your Rx who had been given up. Treated him four months. He is now sugar free; leg pains gone and he is able to put in a full day's work on his farm. Quote in quantity lots and send literature to my brother Dr.---."

### CALIFORNIA

Doctor writes - Two years ago I took your Diabetic treatment and got well. But a severe attack of abdominal Flu has caused a return of the Diabetic symptoms. Check herein for reorder.

### OHIO

Another Physician who divided his first treatment between two patients. 35 days later - "The female patient is doing nicely. Itching of the vulva all gone, feels well and some days shows no sugar. The male patient is gaining in weight, feels better and is at work (watchman) but sugar has not reduced much hence am sending for more."

### PENNSYLVANIA

Doctor's first order closes - "I hope we will get results as your literature leads us to believe." 63 days later patient (probably member Drs family) writes on the Doctors orders to rush another course, "greatly benefited and do not want to be without it."

### OHIO

With a reorder this Physician, former President of his State Medical Board, writes - "I have used your Rx in several cases (Diabetes) with good results. Send at once."

### ILLINOIS

With his check for his twelfth order for the Diabetic treatment this Doctor reports - Am having good success - hurry it on.

THE HISTORY OF THE  
REPUBLIC OF THE UNITED STATES

1776-1789

The American Revolution was a war for independence from Great Britain. It began in 1775 and ended in 1783. The war was fought between the thirteen colonies and the British Empire. The colonies won the war and became the United States of America. The war was a result of the colonies' desire for self-government and their opposition to British rule. The war was a turning point in American history and led to the creation of the United States.

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We crowd the accounts of 12 Physicians into this page, Six in Cities and Six in Towns, to accent a most important fact, viz. - the consistent character of the response to this treatment, the figures testifying as nothing else can that Physicians are not only getting results but the same results over and over.

There are about 20,000 annual deaths in the U.S. from Diabetes. Assuming six years of life for each there are about 120,000 cases, (about one for each 1000 of population) less than one case annually for each of the 150,000 Physicians. It will thus be seen the Physicians below are getting Diabetic practice out of all proportion to the average, which means Physicians using this treatment, both in Cities and Towns, are getting results that are sending patients from a wide range. After you have put one or two in comfort with mild internal treatment that does not have to be continued indefinitely you will begin to have calls from other Diabetics as the following orders prove:-

ILL (pop 1200)		ORE (pop 3000)		WEST VA (pop 1100)		TEXAS (pop 3000)		PENN (pop 1000)		CALIF (pop 1600)	
Sep	\$6.30	Jul	\$6.30	Mch	\$12.60	Aug	\$6.30	Mch	\$6.30	Jan	\$6.30
Nov	6.30	Sep	12.60	May	12.60	Sep	6.30	May	12.60	Mch	6.30
Apl	12.60	Nov	12.60	Jun	25.20	Dec	6.30	Aug	12.60	May	6.30
Jun	6.30	Dec	12.60	Jul	25.20	Dec	6.30	Jun	12.60	Jul	12.60
Aug	6.30	Feb	12.60	Aug	25.20	Feb	6.30	Jul	12.60	Sep	12.60
Nov	6.30	Mch	12.60	Oct	12.60	Feb	6.30	Dec	12.60	Nov	6.30
Sep	6.30	Mch	12.60	Dec	18.90	Apl	12.60	Feb	12.60	Jan	6.30
Jan	12.60	Apl	12.60	Jan	18.90	Jun	12.60	Apl	12.60	May	12.60
Jul	12.60	Jul	6.30	Apl	12.60	Aug	12.60	Aug	12.60	Aug	6.30
Nov	12.60	Oct	12.60	Jun	18.90	Nov	12.60	Dec	12.60	May	12.60
Jan	12.60	Jan	6.30	Sep	18.90	Dec	12.60	Feb	12.60	Jul	12.60
Mch	6.30	Apl	12.60	Dec	25.20	May	12.60	Apl	12.60	Sep	6.30
Apl	6.30	May	6.30	Feb	37.80	Oct	12.60	May	12.60	Oct	12.60
	<u>\$113.40</u>		<u>\$138.60</u>	Sep	18.90		<u>\$126.00</u>	Aug	12.60	Feb	6.30
				(*)	31.50			(*)	63.00	Mch	6.30
					<u>\$315.00</u>				<u>\$233.00</u>		<u>\$132.30</u>

CALIF		NEW YORK		MICH		WIS		NEW YORK		PENN	
Nov	\$6.30	Oct	\$12.60	Sep	\$6.30	Sep	\$6.30	Jan	\$6.30	Oct	\$6.30
Jan	12.60	Dec	12.60	Nov	12.60	Dec	6.30	Mch	12.60	Dec	6.30
Mch	12.60	Feb	6.30	Dec	12.60	Dec	6.30	May	12.60	Jan	12.60
Aug	12.60	Mch	6.30	Feb	12.60	May	6.30	Dec	12.60	Mch	12.60
Nov	12.60	May	12.60	Apl	12.60	May	6.30	Jan	12.60	May	12.60
Apl	12.60	Jul	12.60	Jun	12.60	May	6.30	Feb	31.50	Jun	12.60
Sep	12.60	Sep	12.60	Aug	12.60	Aug	6.30	May	25.20	Jul	12.60
Mch	12.60	Oct	12.60	Nov	12.60	Oct	12.60	Aug	25.20	Aug	12.60
Apl	18.90	Nov	12.60	Jan	12.60	Jan	12.60	Nov	25.20	Sep	12.60
Jun	18.90	Dec	12.60	Apl	25.20	Jun	12.60	Dec	25.20	Oct	12.60
Sep	25.20	Jan	12.60	Jul	25.20	Aug	12.60	Jan	25.20	Dec	12.60
Jan	18.90	Feb	12.60	Dec	25.20	Sep	12.60	Mch	25.20	Jan	12.60
Mar	37.40	Mch	12.60	Apl	25.20	Nov	12.60	Apl	50.40	Feb	12.60
May	18.90	Apl	12.60	Jul	50.40	Jan	12.60	Jun	25.20	Apr	12.60
Oct	18.90	Apl	12.60	Feb	50.40	Feb	12.60	Jul	50.40	May	12.60
Nov	25.20	May	12.60	Jun	50.40	Feb	12.60	Sep	50.40	Sep	12.60
Jan	12.60	Jun	12.60	Jan	50.40	Mch	12.60	Nov	50.40	Jan	12.60
Mch	12.60	Jul	12.60	Aug	50.40	Jun	12.60	Jan	50.40	Apl	12.60
Apl	12.60	Aug	12.60	Jan	12.60	Sep	37.80	Mch	50.40	Jul	12.60
Jun	12.60	Sep	12.60	Mch	12.60	Nov	37.80	May	50.40	Aug	12.60
(*)	<u>126.00</u>	(*)	<u>138.60</u>	Jul	12.60	(*)	<u>207.90</u>	(*)	<u>301.60</u>	(*)	<u>113.40</u>
	<u>\$447.10</u>		<u>\$378.00</u>		<u>\$507.70</u>		<u>\$415.80</u>		<u>\$919.00</u>		<u>\$352.80</u>

(\*) No room to itemize.





## Important Diabetic Practice in a City of 7000.

Physicians do not have to be in large cities to develop important Diabetic practice as the following orders from a physician in an Eastern city of 7000 population prove. Note the steady increase in the size of his orders:

\$ 6.30	\$25.20	\$50.40
12.60	25.20	50.40
12.60	25.20	50.40
12.60	25.20	50.40
12.60	50.40	50.40
31.50	25.20	50.40
25.20	50.40	50.40
<u>25.20</u>	<u>50.40</u>	<u>\$768.60</u>

On the estimated basis of one case of Diabetes per thousand of population there should be about ten cases of Diabetes in his city and environs, to be divided between fifteen local physicians. No one of them, likely, had more than two or three. At the average physicians' requirements in the use of this treatment the first four orders should have more than met this physician's wants for his share of the local cases, which means that he has already prescribed over \$600.00 worth of the Capsules for patients from a distance. And it is easily explained - when Diabetics learn there is a physician who is giving patients relief (reported by physicians all over the country) under INTERNAL TREATMENT THAT IS PAINLESS, HAS NO DANGEROUS REACTIONS and DOES NOT HAVE TO BE CONTINUED INDEFINITELY, the mere mention of the physician's name and location makes a hundred mile visit no obstacle to patients on starvation diets, needle injections, etc. without hope of cessation or relief.

If this physician had been told he was going to buy \$1000.00 worth of the Diabetic Capsules he would probably have said something more forcible than elegant, but he has already had over \$700.00 worth and that, too, in a city in which there were, probably, not a dozen Diabetics.

He was a diabetic himself and was taking serum injections three times a day. He stopped the injections and put himself on this treatment and became sugar free and put patients on it with same results. And from the sudden development of his Diabetic practice it appears patients all over his part of the State are learning what he is doing and are profiting by it for his Diabetic practice has broken local limitations and is invading a wide range.

And in a West Virginia town of but 1100, in which there would ordinarily be but one Diabetic, one of the two local physicians was treating two cases without any thought of other practice in this direction. He ordered for both. Both responded and then Diabetics began to flow to him from the outside and he has had over \$300.00 worth of the Diabetic Capsules.

A Penn. Physician, whose account is also running to hundreds, and who also writes, "I cut off injections at once on giving the Capsules" has gotten such results he has thought seriously about specializing in Diabetes. Location is no object when patients on starvation diets, painful injections, etc. learn you put them in comfort with mild, internal treatment. Physicians who have learned how definitely they can now control sugar and symptoms are attracting Diabetic practice out of all proportion to the limitations of their environments and Physicians of all Schools are awaking to the new field of practice this situation is developing.

(An important consideration is that as this treatment has no dangerous reactions and is in capsules and mailable, in simple Diabetes Mellitus without gangrene or acidosis after the first personal visit by patients from a distance the doctor can finish many cases by mail.)



[illegible]

There are Towns in which one Physician is treating several times as many Diabetics as the local population represents. For instance

#### IN THIS TOWN OF 2400

at one case of Diabetes per thousand of population there should be approximately three cases, in this instance to be divided between the four local Physicians - less than one each. On the estimated basis of \$8.00 to \$10.00 prescribed per case this Physician's wants would ordinarily be limited to a comparatively few dollars but here are his orders to the date this was written:-

6.30	12.60	12.60	12.60
6.30	12.60	12.60	12.60
12.60	12.60	12.60	12.60
12.60	12.60	12.60	12.60
12.60	12.60	12.60	37.80
12.60	12.60	12.60	37.80
12.60	12.60	12.60	<u>\$378.00</u>

It will be seen he has probably treated something over 40 cases, many times the number of cases the population represents, meaning, as we have shown over and over, that Physicians using this treatment, whether in Cities or Villages, are attracting Diabetic practice out of all proportion to their environments. And here is another in the same category:

#### IN THIS TOWN OF 1100

in which there is ordinarily but one case, the Physician happened to have two Diabetics under his care. He sent for a demonstrating quantity and put both on it. Both responded and Diabetics from elsewhere were attracted, as his orders to date attest, viz:

12.60	25.20	12.60	37.80
12.60	12.60	18.90	18.90
25.20	18.90	18.90	31.50
25.20	18.90	25.20	<u>\$315.00</u>

At an average requirement of \$8.00 to \$10.00 per case, it will be seen he has probably treated something like 30 cases, ten to twenty times as much Diabetic practice as a town of 1100 would ordinarily support.

#### AND IN THIS TOWN OF 1000

the local Physician, who is closely following the above experiences, wrote on one of his recent orders - "I have built up a clientele in Diabetes," The idea of building up "a clientele in Diabetes" in a town of 1000 seems ridiculous but we are using his own words and his orders and checks being matters of record are unimpeachable. His orders to date follow:

6.30	12.60	12.60	12.60
12.60	12.60	12.60	12.60
12.60	12.60	12.60	12.60
12.60	12.60	12.60	12.60
12.60	12.60	12.60	(*)25.20
			<u>\$258.30</u>

And such experiences are not limited to small towns. In an interior City of less than 10,000, ordinarily involving probably ten cases to be divided among the dozen local Physicians, one of them has already prescribed over \$900.00 worth of this treatment and his cases are probably crowding the hundred mark.

(\*) No room to itemize.





# What Physicians in Small Towns are Doing.

Based on mortality reports there is probably one case of Diabetes per 1000 of population and the physician in a town of 1000 to 2000 is likely to say "There are no Diabetics here." And that is commonly true. Hence, the demand for this treatment from physicians in small places puzzled us at first but experience disclosed that most of the cases treated are not local but are drawn from other places. The treatment of Diabetes has been more or less hopeless. But after the physician has put one or two local cases in comfort his Diabetic practice widens to adjoining towns, as is proved by accounts like the following:

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For instance, here is a little town in Missouri	\$6.30	12.60	\$ 6.30
having but 200 people. It does not look like there would	12.60	12.60	6.30
be a single case there but here are this doctor's orders;-	12.60	12.60	
	12.60	12.60	<u>\$107.10</u>

---

And we would not expect a case in this Iowa town of	\$6.30	12.60	6.30
350 but the local physician has prescribed as follows;-	6.30	12.60	12.60
	12.60	12.60	
	6.30	12.60	<u>\$100.80</u>

---

In this Calif. town of 1600 the physician put a member	\$6.30	12.60	12.60
of his family on it, got the usual results, then prescribed	12.60	12.60	12.60
as follows;-	12.60	12.60	12.60
	12.60	12.60	<u>\$132.30</u>

---

In this N.Y. town of 1600 where we would expect but	\$6.30	12.60	12.60
two cases the physician has prescribed to date;-	12.60	12.60	12.60
	12.60	12.60	12.60
	12.60	12.60	<u>\$132.30</u>

---

This town in Penna. is not in Druggists' Directory,	\$6.30	12.60	12.60
apparently not sufficient business to justify a drug	12.60	12.60	12.60
store, but the local physician has prescribed;-	6.30	12.60	12.60
	6.30	12.60	
		12.60	<u>\$132.30</u>

---

In this town of 1100 that ought ordinarily show but	\$12.60	12.60	25.20
one case of Diabetes the local physician's orders show he	12.60	18.90	25.20
is treating many from other places, viz;-	25.20	18.90	37.80
	25.20	12.60	25.20
	25.20	18.90	<u>\$296.10</u>

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Note how the size of this physician's orders increased	\$6.30	18.90	37.80
in this Penn. city of 4000;-	6.30	37.80	37.80
	12.60	37.80	<u>\$195.30</u>

---

Here is another Penna. city in which the physician's	\$6.30	12.60	25.20
account is itemized to show how his Diabetic practice	12.60	18.90	25.20
developed;-	12.60	18.90	25.20
	12.60	18.90	<u>\$189.00</u>

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In this town of 2200 in Ill. the doctor who writes	\$12.60	12.60	6.30
"Am having good success" has prescribed;-	12.60	12.60	6.30
	12.60	6.30	
	12.60	6.30	<u>\$100.80</u>

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None of these accounts could possibly be true if the physicians were not actually giving the patients the relief they are reporting from all over the country.



# Reports on 50 Cases of Diabetes

Epitomizing the results Physicians are reporting under the thirty-day trial treatments of UVURSIN capsules we are now demonstrating to the Physicians of America.

We expect the demonstrations to reduce sugar and symptoms 20 to 40% but it will be noted that the reports often record the complete disappearance of the sugar during the demonstrations, results extremely gratifying to both Physicians and patients.

If half the reports are true (we have hundreds) the reduction of sugar in Diabetes by internal treatment is now an established fact—a fact vital to every Physician treating Diabetes, as evidenced by epitomes of the results in fifty cases, viz. :—

- PENNA. —Sugar disappeared fourth week of the demonstration.
- CALIF. —"Complete loss of sugar" third week of demonstration.
- MAINE —Sugar (heavy) lessening 14th day, sugar free 20th day of demonstration.
- N. Y. —Sugar 6%, was less than 1% the 21st day of demonstration.
- MO. —Sugar disappeared during demonstration, patient feeling better every way.
- ILL. —Diabetic gangrene, semi coma. Sugar disappeared 3rd week, general improvement.
- MASS. —Excessive thirst, polyuria and sugar disappeared during demonstration.
- CONN. —"Have finished 30-day demonstration and am sugar free."
- IOWA —Sugar drops 60% first 30 days (30 days later sugar free).
- N. Y. —Sugar 6.4% became "fractional" (40 days later sugar free).
- MO. —Sugar four plus disappeared during the demonstration.
- MO. —Sugar quickly disappeared—"Should be known to all the world."
- KANS. —Demonstration not quite concluded—"Practically sugar free."
- KANS. —No sugar last test, much better in every way.
- NEBR. —Sugar free first time in years and feels better than for years.
- WIS. —Case transferred from injections, sugar disappeared during demonstration.
- ORE. —Case transferred from injections, sugar disappeared first 21 days.
- TEXAS —Diabetic gangrene—"nearly sugar free, feet better."
- TEXAS —"Fifty per cent better than for four years."
- ILL. —Diabetic gangrene, sugar persistent. Sugar free the 20th day.
- OHIO —16th day sugar reduced to trace, condition continually improving.
- MO. —"No sugar present after first week." "Fine."
- FLA. —Transferred from injections—"It is all you said for it."
- N. Y. —Sugar (quite heavy) disappeared during demonstration.
- ILL. —Sugar (and albumen) disappeared during demonstration. Much improved.
- OHIO —Sugar reduced more than half and feeling much better.
- PENNA. —Diabetic gangrene—sugar disappeared during demonstration.
- CALIF. —No sugar after the 20th day of the treatment.
- IOWA —Case transferred from injections; 50% better.
- FLOR. —"Intractable case;" Sugar disappeared 15th day, gaining weight.
- N. Y. —"Sugar came down from 4% to negative" during the demonstration.
- IOWA —Transferred from injections—"Loaded with sugar"—"Practically none the 19th day."
- FLOR. —Diabetic, "very emaciated." "It did all you said it would."
- GA. —Charity case—"It worked such wonders will pay for it myself."
- MO. —My third order and good results in all so far.
- IND. —"They are doing the work and act so quickly," etc.
- N. J. —"I want to continue your wonderful capsules."
- PENNA. —"I am delighted. Check enclosed to continue."
- OHIO —"My wife's foot has healed. Sugar free."
- MO. —Sugar 3.45 with gangrene. "So improved that . . ."
- PENNA. —"No failures when the diet is held." (Has had over 20 cases.)
- PENNA. —Diabetic gangrene—Sugar free; check to continue.
- ILL. —Sugar free about the 15th day with improvement.
- N. J. —Sugar 11 grs. pr. fl. oz. dropped to trace 20th day.
- TEXAS —"My patient is improving rapidly."
- WIS. —"Patient in bad shape." "Now feels much better."
- KANS. —Sugar free 3rd week "and has remained so."
- ILL. —"On the treatment two weeks and much better."
- \*MO. —Sugar 8% with gangrene—Sugar trace, gangrene healed.
- \*N. J. —Sugar 5% with gangrene. Doing finely; can now walk.
- \*KY. —"Critical." "Sugar trace, gangrene area healing rapidly;"
- \*IND. —Sugar heavy; heel sloughed off. "General improvement. Gangrene checked."

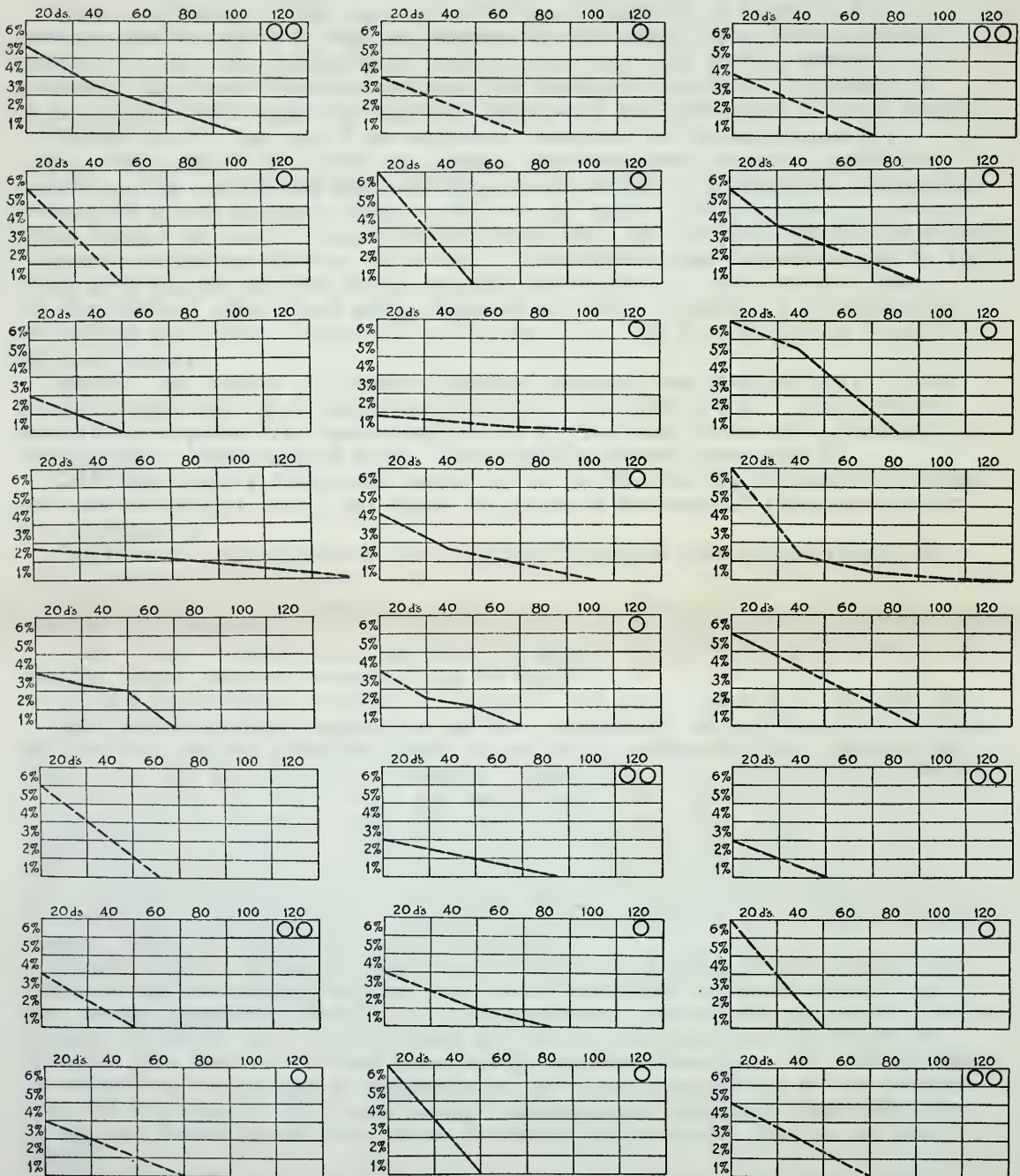
Above reports were written on cash orders to continue treatment.

\*Cases required 60 to 90 days treatment.





Charts illustrating reports made by Physicians in 24 cases of DIABETES to show comparatively the number of days that elapsed between the beginning of the treatment and the elimination of the sugar.

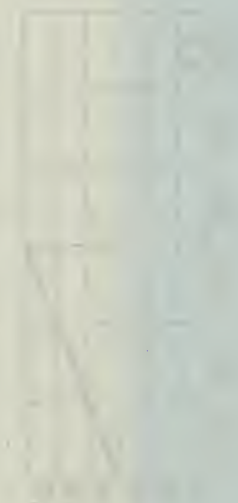


- This sign in upper right hand corners designates cases in which the patient was a member of the Physician's family.
- In cases bearing this sign the Physician himself was the patient.

The bottom line in each block means complete elimination of the sugar, or so attenuated it was referred to as a trace.

In cases requiring over sixty days to eliminate the sugar it is our belief that in most of these cases deviation from the diet was the deterring factor.

The following are the results of the analysis of the data obtained from the experiments conducted on the effect of the concentration of the solution on the rate of reaction.





## SOME 30 DAY RESULTS

While a majority of the reports recording elimination of sugar show the average time was 60 to 70 days we present the following, taken from some late reports, to show how quickly some cases respond when the diet is strictly observed. In these cases particularly the treatment should be continued one to two months after sugar and symptoms disappear, the last month in half doses.

WISCONSIN - On the 16th I was called to see Mrs. B. (Diabetic) age 57; fleshy, had lost 30 lbs. last two months. Was very weak, nervous, mouth dry, tongue heavily coated and like sand-paper; was really in a frightful condition. Urinalysis showed 70 grams sugar to 100 cc. of urine. Had her under injections three times a day until I received your capsules. At this time urinalysis showed 7 grams of sugar per 100 cc. of urine. I discontinued the injections and in its stead gave the patient two of the capsules three times a day. At this date (20 days later) urine shows entire absence of sugar. Patient is looking fine, has gained some flesh, feels well and is delighted and I am enclosing check for another supply.

OREGON - Dr. writes - "I have a Diabetic seventy-five years of age. I have him on injections. Want something that can be given by mouth." The Doctor's next letter reports "The sugar disappeared in less than three weeks, patient feeling fine. Have another case. Check herein for two treatments."

CALIFORNIA - This Physician, reporting on his first case, writes "The patient has been doing well - no sugar since the first of the month." (The 20th day of the treatment.)

CALIFORNIA - This Physician also reported "complete loss of the sugar" the third week of the treatment.

PENNSYLVANIA - This Physician reports the sugar disappearance the fourth week of the treatment.

IOWA - Case 1: Sugar drops 60% first 30 days. 30 days later sugar free. Case 2: Sugar started downward first 10 days.

MAINE - Sugar (heavy) noticeably lessened 14th day. Sugar free the 20th day.

ILLINOIS - Diabetic Gangrene in extremis reported by Major, Med. Corps, U.S.A., who got such results personally that he decided to resort to this agent at what appears to have been a critical moment. Twenty days later came the first report.

"Patient, age 60, three weeks ago was in semi coma. Had lost 60 lbs. in weight, pulse so rapid and irregular could hardly count it; sugar 5%; S.G. 1.038; many small localized skin areas of gangrene and two on right foot 1x2 inches with infection. These were dressed with moist alkaline depleting solution and your Rx with cardiac Rx given internally. Result: sugar gone; urine neutral; skin healing rapidly; infection cleared up; mind clear, and he is feeling almost normal. Sounds foolish as a 3 weeks' result."

Second report - (a month later) "As to that very serious Diabetic case, he lost much of the covering of the lower end of the tibia inside the ankle. As soon as the gangrene showed a line of demarkation I removed the gangrenous tissue, keeping the ankle in a moist dressing and on the first day that the wound was bacteria free started ox blood dressings to encourage healing. The foot is nearly healed and the patient is beginning to get around and will go to his country home for the summer. Have been giving a subcutaneous injection every other day of  $1\frac{1}{2}$  grs. Sodium Cacodylate. I see no reason why he cannot live on for many years."

This treatment is giving Physicians a distinct advantage over those whose resources are limited to old measures.





## MORE 30 DAY REPORTS

As said elsewhere, the reports often show 60 to 70 days were required to eliminate sugar but here are some more 30 day reports that show how quickly some cases respond when the diet is strictly held. But the treatment should be continued one to two months after sugar disappears to prevent early return.

MISSOURI - Physician writes, "I am treating three cases over 45. Would like to try something besides the needle if I can get results." We sent 30 day demonstration for one case.

Report - "Sugar has practically disappeared. In fact, last five days there has been no sugar. x x x Patient feels better in every way. Find draft enclosed for 54 days treatment. Get this to me at once."

MISSOURI - Dr. writes, "I have two cases of Diabetes in men over 45. Send your free demonstration." Thirty day course was sent.

Report - "I am more than pleased with the treatment; my patient was sugar 4 plus and in five days he was sugar free. Send 54 day treatment. Check enclosed."

FLORIDA - Dr. writes, "I have a patient over 45 to whom I have been giving injections for some time, but does not respond as I would like, is very emaciated. I would like to try your treatment." We sent a 30 day demonstration.

Report - "The treatment you sent me has done all you said it would and I am very much pleased. Am enclosing check for the 54 day course. Send out at very earliest convenience."

GEORGIA - Dr. writes, "How about a free demonstration for a case over 50 with Diabetic Gangrene, woman, unable to pay for medical attention." Was sent the usual 30 day demonstration.

Report - "Send by mail collect 54 day treatment. It is a charity case but your free treatment has worked such wonders I am going to pay for it myself."

KANSAS - Dr. reports a Diabetic over 70 he has been treating about 9 years. Sent 30 day demonstration.

Report - "About 6 weeks ago she collapsed; heart action bad, mitral murmur, broken compensation, difficult breathing, general weakness, sugar plenty. I put her to bed. On receipt of capsules, prescribed them with my treatment for the general symptoms. She is much better in every way. No sugar last test. Check enclosed for the 54 day treatment."

NEBRASKA - "Am treating a woman age 52 with lots of sugar, and a few others, but want to demonstrate on this one." Sent 30 day demonstration.

Report - The capsules were given with VERY good results. Is sugar free for first time in years and says she feels better than she has for years. Enclosed is check for which send the Diabetic Capsules."

TEXAS - "I have Diabetic on my list, 63. Has had suppuration of several toes. Have him on protein diet and injections. Would like to receive a trial of your capsules." Sent 30 day course.

Report - 60 days later - "Find check for another supply. Patient was nearly sugar free, feet better. Used up the sample course. Now has much sugar and feet worse. Get the capsules out at first opportunity." (Another illustration that it is poor policy to drop the treatment the first month even if sugar and symptoms seem to have disappeared.)

TEXAS - "Am treating Diabetic age 49. Has taken many injections. Would like a trial." Sent 30 day demonstration.

Report - "She is 50% better than she has been for 4 years. Thanks. Find check for 54 days treatment. Please rush as we are almost out."





SOME RECENT ORDERS - AND WHY.

ILLINOIS

This Physician wires, "Am treating a Diabetic aged 70. Has gangrene of toe, sugar persistent. Send literature and demonstration via air mail." We sent the usual 30 day demonstration.

Report - "Received the demonstration and gave the patient two of the three packages of capsules. She is sugar free. (20th day-J.J.F.Co.) Enclosed find check for full course for another Diabetic. Am very grateful to you for sending the demonstration. Looking forward to more orders in the future."

OHIO

Dr. writes, "My wife, 52, is suffering from Diabetes, is much opposed to the hypo and dreads the injections. If your capsules are as claimed we will be glad to give them a trial." 30 day dem. was sent.

30 days later Dr. writes, "She began using the capsules on the first and the fourth day began to show improvement. The 16th day a slight trace of sugar, her condition continually improving. We now feel with the aid of the capsules and diet that in a few weeks we are going to have wonderful results." Enclosed check to continue.

INDIANA

Dr. writes - "I am treating a Diabetic age 52. Please send the treatment at once as this is a good case for such a trial. Let me hear by return mail." The usual 30 day demonstration went forward.

2 weeks later - "Find check herein for a treatment for another patient."

30 days later - "Find check enclosed for another treatment. They are doing the work - coming from all sides. This treatment acts so promptly I am getting interested."

ILLINOIS

Dr. writes, "I am treating a Diabetic 47 years of age. I would like to have you send a trial supply and your literature. Please rush."

24 days later - "Thanks for the sample you sent me. Am quite pleased with the results I am getting. Am enclosing check for another order and will order more as soon as these are gone. Rush".

PENNSYLVANIA

Dr. writes, "I am treating five cases of Diabetes all over 45 years old. Would like to know all about your capsules." We sent the literature and 30 day demonstration for one patient.

20 days later Dr. wrote - "I am delighted with the Diabetic treatment and am enclosing check for a half doz. boxes of the Diabetic capsules."

INDIANA

With his first order for Diabetic treatment this Physician writes.

"This is for myself. I am with the \_\_\_\_\_ Hospital."

8 mos. later came his second order as follows: "Find check enclosed for another course of the Diabetic treatment. I ordered a treatment in November which resulted in an apparent cure but about 30 days ago I went on a vacation and ate everything in sight and some of the symptoms have returned and I think I should take another course."

(In half a dozen places in our literature we advise against dropping the treatment immediately upon abatement of sugar and symptoms. J.J.F. Co.)

NEW JERSEY

Physician writes, "I have a case of Diabetes over 45 (myself)."

We sent the usual 30 day demonstration.

6 mos. later - "Send another course of your wonderful Capsules. I got some good results in my own case and I want to continue." Another case in which sugar and symptoms were probably practically eliminated by the demonstration and the treatment dropped.)





## How Long Should The Treatment be Continued.

In patients over 45 who live to the diet and instructions the usual experience records the sugar and specific gravity beginning to decrease the 10th to 20th days and shortly thereafter (frequently before), the polyuria, thirst, pruritis or emaciation, as the case may be, beginning to diminish. (Frequently this is reversed, the patient beginning to feel better before sugar shows much response.)

While two treatments (of  $\frac{1}{2}$  dz. each) often eliminate the sugar (frequently the first half dozen accomplishes this result), from a study of the accounts and correspondence with physicians in nearly all the States who are prescribing this treatment, it appears that many patients lose fear and discontinue as soon as they are comfortable. The day this was written we received a Penna. Physician's order for his ninth treatment with the statement that his last patient, a hospital case, was again doing her own work and wanted to discontinue although she had not finished the first course. These cases are often back in the physician's hands, frequently in a few months, "as bad as ever." Experience shows that the best preparation against recurring sugar and symptoms is to continue the treatment in the first instance for two to three months after the physician records the complete disappearance of sugar and symptoms, taking the last month in half doses.

In this connection, it gives us pleasure to say that in patients who were under the influence of the treatment two to three months after the elimination of the sugar and symptoms, recurring symptoms in a number of cases, years thereafter, were reported as yielding to brief recourse of two to three weeks of the treatment. The death in this City recently of a capitalist in whose case the sugar was eliminated in the first instance over twenty years ago is a case in point. Patient was at his office daily up to the day of his passing, which was caused by cardiac asthma. Several times during the twenty years short courses of the Diabetic agent were resorted to to control recurring symptoms.

In a similar case reported from Montana the sugar was eliminated 16 years ago. Patient at 75 was still living in July, 1927. "Sweets in the diet caused sugar to return several times but return to the diet with his let-up on the sweets restored the usual condition of health."

As a contrast to the above two local cases in both of which the sugar was eliminated over 10 years ago report no return of sugar up to date.

In cases involving gangrene, while the sugar, polyuria, etc. appear to respond as usual, the gangrenous lesions frequently do not begin to show signs of response until the sugar is nearly nil. Hence patience is very necessary when this symptom is in evidence. (Some helpful suggestions as to the local treatment of this symptom will be found among the reports on the first page of the brochure herein.

In all cases painful or troublesome symptoms may be prescribed for just as if this agent was not being given. Where the patient is merely on diet the treatment is usually given alone. If there is constipation or hepatic sluggishness it is well to keep the liver and bowels comfortably functioning. Sugar Xs may commence the 10th to 14th days with the expectation, in most cases, that the sugar and specific gravity are beginning to show the first signs of modification .





SOME "UP TO THE MINUTE" REPORTS.

KANSAS

"Have female Diabetic; on injections 2 years; is now totally blind. Would like to relieve her of the injections." Sent 30 day demonstration. Report - "She is doing as well or better than on injections. Sugar has reduced. Check herein to continue."

MISSOURI

Physician asks demonstration to get away from injections. Report - "Sugar has practically disappeared" and he orders for another case. He closes a later order thus - "I believe this is my third order and good results in all cases."

IOWA

Dr. writes, "Am 51. Have had Diabetes 2 years. Am on injections. If you have something that will get away from injections I would like to try it." Sent 30 day demonstration. Report - "I am 50% better since taking the treatment." Enclosed check for another course.

FLORIDA

"I gave the trial treatment to a very intractable case of Diabetes with very gratifying results. Gain in weight and sugar free after about the 14th day. Duplicate quickly. I have several cases of Diabetes under my care."

MISSOURI

Dr. who is himself a Diabetic asks for demonstration. He wrote, "I am intensely interested and will co-operate with you to the uttermost if results warrant." In his report, 23 days later, he stated the sugar which "had been running for 2 years" had disappeared. He writes to order for a patient and does not disguise his surprise, closing "Should be known to all the world."

IDAHO

"I am unable to find a trace of sugar. This is the second case I claim to have cured with your treatment." "I know of no case cured with injections."

NEW YORK

Patient showed "improvement first week." "Sugar disappeared during the demonstration. Five weeks later still free and I am widening the diet." "This was a chronic case of years standing."

PENNSYLVANIA

Dr. writes, "I received the trial treatment for Diabetes and had most wonderful results. Check herein for a treatment."

MISSISSIPPI

Dr. writes on his order for another treatment, "It did my sister, who is a Diabetic, more good than anything I have been able to get hold of."

CHICAGO

"The trial treatment worked like a charm. Enclosed is check for 54 day course."

CHICAGO

Female 44, case of 7 years standing, sugar 2.7%. Sugar and albumen disappeared during the demonstration. Condition much improved. S.G. 1019. Order to continue.

PENNSYLVANIA

The demonstration reduced the sugar 50 per cent.

WASHINGTON

Dr. writes, "Several years ago I suffered a severe attack of glycosuria. Your treatment took care of my troubles. This A.M. I discovered it was returning. Send treatment air-mail C.O.D."



4. The following are the names of the persons who have been identified as having been in contact with the subject during the period of the investigation:

200

[illegible]

1991

7132-100

IN JET LANE, 30 1/2 MILES SOUTH OF RICHMOND AND ABOUT 10 MILES WEST OF  
IN WILSON COUNTY, 10 MILES SOUTH OF RICHMOND AND ABOUT 10 MILES WEST OF  
DR. AND JET LANE, 30 1/2 MILES SOUTH OF RICHMOND AND ABOUT 10 MILES WEST OF

JOHN J. FULTON CO.  
88 First Street  
San Francisco, Calif.

Dear Doctor:

Physicians are reporting favorable reactions in Diabetes in over four-fifths of the cases, as will be seen from the current literature herewith.

The administration is simple. Where patient is merely on diet this treatment is given alone, although it may be aided by symptomatic treatment for painful or troublesome objective symptoms. And in all cases in which there is constipation or hepatic sluggishness it is well to keep the liver and bowels comfortably functioning.

If the patient is over 45 and lives to the diet and instructions and takes the treatment faithfully, you will not have the common experience if you do not between the 10th and 20th days find the sugar and specific gravity beginning to decrease, and shortly thereafter (frequently before) note that the polyuria, thirst, pruritis or emaciation as the case may be is beginning to diminish. (Frequently this is reversed, the patient beginning to feel better before sugar shows much response).

While two treatments often eliminate sugar (frequently the first accomplishes this result) it cannot be too strongly impressed that experience shows it is important to continue the treatment one to two months after sugar and symptoms disappear, taking the last month in half doses.

These capsules are not stocked, but are sent by parcel post, prepaid at \$6.30 per half dozen (54 days treatment). You will find it intensely gratifying to get results in cases that "have gone the rounds" and did not get a reaction till they reached you.

Yours very truly,  
JOHN J. FULTON CO.

An interesting feature of the correspondence is the increasing number of physicians who put two patients on the treatment and in due course reported both as responding, for instance:

IOWA

"I divided the Diabetic agent between two patients—case one, Mrs. S— sugar was 2.83%, thirst is gone, elimination nearly normal in quantity, gain in weight 11 pounds. Two examinations by highly competent pathologists now show no trace of sugar.

Case two, Judge ———. Excretion was 126 ounces, sugar 4 per cent. On the thirtieth day total urine was 74 ounces, sugar 1.4%, gain in weight 2 pounds.

ILLINOIS

This Physician ordered for two cases Diabetes. With his third order he reports—"I am getting splendid results. Both cases (females) were practically invalids and are now up doing as much work as ever and gaining in flesh. But on standing a few hours test gets a slight trace of sugar, hence check for two more treatments."

NEW YORK

Physician divided his first treatment between three patients. A little over 30 days later he re-ordered stating that all were getting fine results. 40 days thereafter his third order reported the practical recovery of all three and that he was starting a new patient. Two of the patients had been on injections for several years.

WEST VIRGINIA

This physician put 4 Diabetics on this agent.

40 days later—First advices on the four cases as follows:

Mrs. H—, age 55. "Very anemic, had given up in despair when she came to me." Sugar drops 80%, polyuria and thirst greatly reduced, pain has disappeared, marked improvement and patient again doing her own house work.

Mrs. T—, age 52. Sugar 3% drops to a trace, polyuria much less, burning relieved and patient much stronger, pains almost gone.

Mrs. D—, age 44. Sugar and polyuria reduced over half, patient's strength much improved.

Mrs. B—, age 47. Sugar has disappeared, polyuria about normal and strength much improved.

"I am delighted with the results so far. It is bringing me business. Only one thing wrong—you are so far away. I have two more cases impatiently waiting last order."



# ILLINOIS

Dr. writes with 3rd order, "Having very good results—three cases under treatment. The first is sugar free, s.g. 1020."

# MICHIGAN

Dr. writes—"I have three cases of Diabetes and am prescribing the Diabetic Agent. Must say I am getting very good results."

# MINNESOTA

The first case male (56) has gained 15 pounds, sugar reduced to a trace. Codein, etc., had failed.

Second case—(50) was in a bad way—high sugar, frequent urination, great loss of weight. All cardinal symptoms are abating. Has gained 8 pounds and prognosis now favorable.

# INDIANA

Dr. writes, "I have two Diabetics, heavy with sugar (over 6 per cent) excessive polyuria and thirst, heavy loss in weight and very weak."

First Report—Sugar reduced 50 per cent in one case and nearly 60 per cent in the other, polyuria half in both cases, thirst scarcely any in one case and much improved in the other. Both are much stronger and have gained in weight five and thirty pounds respectively—great improvement. We wrote asking if he did not mean three instead of thirty pounds gained in case two. The Doctor replied "I mean to say he has gained thirty pounds, not three—great improvement."

Third Report—thirst virtually gone, less polyuria, sugar much less S. G. 1026 and 1028 respectively.

Fourth Report—Case one improvement continues, patient two is at work.

# NORTH DAKOTA

Physician writes from a Hospital of which he is in charge, stating that a brother and sister have inherited Diabetes, one of 5 years and the other of 12 years development.

60 days later—both report progress with reorder in each case.

Later—The Doctor reports both improved and orders for a new case.

# CALIFORNIA

Patient (Physician age 45) passing 2 ½ quarts with varying sugar, usual weakness, etc.

24 days later—"I am improving but not as fast as I wish. Sugar now steady at a trace. I loaned one of the beds to a patient of mine. Her progress has been marvelous, so wish to place her on a full treatment—check for same herein."

# MISSOURI

Sent the treatment to this physician for a case of Diabetes in his family. He got such results he promptly ordered for another patient.

Second Report—The two cases of Diabetes have improved so much they are out of my hands. (The Dr. enclosed orders for 2 more patients).

# MICHIGAN

Physician, State Med. Ex'r. for large Fraternal Organization, reports—"Have started the third Diabetic case and now on the third unit with decided improvement. The two old patients continue to improve. Rush duplicates for all three."

# IOWA

Physician holding a chair in the faculty of an Eastern Medical College in a letter asking a question closed—"I have used the Diabetic preparation in two cases in my practice with practically complete results and have recommended it to fellow practitioners who have also been successful."

# CALIFORNIA

The patient from Taft went back feeling fine, pain gone, urine cleared up. Tests proved normal. Another put on the Diabetic Rx was in today; all traces of sugar gone.

# FLORIDA

"In both cases (Diabetes) it acted fine—yet one discontinued as soon as good results were obtained and now I hear is as bad as ever. Check herein for another course, rush."

# MISSOURI

Both physician and parent under treatment for Diabetes. He got such results in his own case that he prescribed it for his parent, later reporting the disappearance of the sugar with corresponding physical improvement.

# OHIO

"Am using your Diabetic Rx with success and satisfaction. Have cured several and benefited all. Would like to specialize in stomach and kidney but can't get away from general practice."

# ILLINOIS

Diab.—"Both sugar and albumen went to a trace and patient began to gain from the alarming muscle shrinkage. Feeling well enough to avoid expense she went without treatment over a month. . . . The test now shows sugar in abundance, S. G. 1030. Am putting her on it again, order enclosed."

Later—As to the case (male aet. 60) that I think is cured of Diabetes, will make assurance doubly sure with another course—so duplicate last bill.

# COLORADO

"I have used your preparation with good results. . . . Practically all have been helped. What I want to know is whether they lose efficacy after prolonged use." (We have known of cases in which the only effect seemed to be amelioration of symptoms in which it was taken off and on for several years with continued results. In a typical case the report was "Do not feel nearly so well without it."—The following from an Oregon physician also answers above—"My own father has used the Diab. Rx for the last 10 yrs. and while it has not cured him it has prolonged his life and made him comfortable altho he does not live right.")

# NEW YORK

Army Surgeon age 45. "Discharged as permanently and totally disabled by Diabetes Mellitus."

Later the Dr. reported sugar decreasing and stronger in every way with complete disappearance of the Neuritis. But feeling that the improvement was due to the Allen diet he stopped the treatment and continued the diet. Exactly one week later he wrote—"I commenced to feel badly again with reappearance of the Neuritis." This caused the Dr. to decide his improvement was due to the treatment as he writes with his reorder. He adds "have also prescribed quite successfully."

# CALIFORNIA

My son 12 has Diab. s.g. 1040. "I understand Diab. in children is hard to manage."

20 days later—"No change."

20 days later—"S. G. has dropped to 1030. I put another Diabetic on it and he is improving. Check herein for further treatment for both." (Again regret to say we have small confidence as to the permanence of the improvement shown in cases of children or very young patients.—J. J. F. Co.)



It will be seen the folder summarizing results is so crowded with reports there is no more room and it is impractical to enlarge it as it already contains more matter than Physicians have time to read. Hence, we are unable to present even epitomes of the Professional reports that are accumulating. For instance, the following will show the very interesting character of reports arriving after the close of the demonstration.

#### ILLINOIS

Doctor writes - "I am one of the physicians who gave your treatment a try-out several years ago and have been practically immune until recently. There is now a severe recurrence, s.g. 1030 up every hour at night. Where is the nearest point to obtain another course?"

(Our record shows that in 1918 the Doctor eliminated the sugar and symptoms in his own case and shortly thereafter put another Diabetic on the treatment with like results.)

Later - "When I last wrote you I was struggling with a spec. grav. that would not budge and a sugar content that was annoying. When half through with the second course it came to normalcy and I have been fine since."

#### ILLINOIS

Doctor writes, "I have had Diabetes over three years. Send 54 day treatment".

First report - Dr. in reordering wrote he was drinking "large quantities of milk," As the improvement was slow he discontinued the milk (milk is prohibited-J.J.F.Co.) and then got "very gratifying results" and now states "am very much encouraged."

Second report - "The result is very gratifying. My tolerance for carbohydrates has greatly increased - so much so that I got no sugar reaction except once last eight days and then it disappeared in three hours. Check herein for Treatment for two relatives both of whom have large quantities of sugar."

#### ILLINOIS

Dr. writes, "Am 64, have had Diabetes 2 yrs.

1st report - Improvement in all symptoms.

2nd report - This morning am sugar free, s.g. 1020. Better in every way.

3rd report 2 months later - Progressing nicely. Am indulging some starch and canned fruit without any evidence of sugar. No thirst or polyuria, s.g. 1020. Check for reorder.

#### ILLINOIS

Dr. wrote previously he had three cases on the treatment with good results.

A rush reorder closes, "I have a case of 20 years standing, just finishing the third Rx; sugar content reduced to about one per cent and gaining in every way. Greatly pleased and so am I."

#### TEXAS

C.O.D., rush, for a patient with Diabetes needing the treatment badly.

2 months later - Patient doing nicely. Sugar disappeared 20th day. Polyuria reduced half. C.O.D. another course.

#### IOWA

Doctor writes - "Check herein for 54 day treatment for patient, age 60, with Diabetic Gangrene.

Later - Dr. reorders reporting - "Patient had an ulcer on left foot for 3 yrs., and three ulcers on right foot for 6 mos., a piece of bone an inch long sloughing behind the small toe. All ulcers healed, patient still on treatment."

#### KANSAS

"Send C.O.D. 54 day treatment for Diabetes."

Report - "Send another. My patient is sugar free today but I think I had better give him another treatment." (It is important to continue the treatment 1 to 2 mos. after sugar and symptoms have disappeared, the last month in half doses.)





# Renal Digest

January, 1929

Announcing a revolutionary innocuous herbal agent that so decisively reduces albumen and symptoms in Bright's Disease, that to give the Medical Profession a practical demonstration we inaugurated the most comprehensive and convincing program we could conceive of, viz.: we tried to reach every Physician in America having Bright's Disease himself or in his family. Proposals offering the demonstration were mailed to the Physicians listed in the American Medical Directory.

It seemed reasonable to assume that no Physician having Bright's Disease himself or in his family would send several thousand miles for further measures, who had not already exhausted the local prescription counters, and that therefore the only response would be from cases that were chronic or had resisted treatment, and as a rule would seem impossible. It was under these difficult conditions that the offers, over 140,000, went forward.

The impossible cannot happen even once, hence we felt a hundred demonstrations in Bright's Disease would be sufficient, but did not suspend till nearly three times that number had applied. To be accurate two hundred and ninety-eight Physicians asked for the demonstration, many reporting the chronic form, some reporting dropsy, others that convulsions were in evidence, and some advising that they had tried nearly everything else without results.

All were served. From these we have had nearly 300 reports. Some withheld their results, and again others sent several reports recording the progressive stages. It will be seen that they overwhelmingly attest the ability of this agent (for Rationale see fourth page) to reduce albumen and symptoms in Bright's Disease, over four-fifths reporting the usual response to the treatment. Under such adverse conditions, the vital fact that four-fifths of the

reports could show favorable reactions seemed so improbable that we had the accuracy of the epitomes of the first hundred officially certified and deposited the original reports and the entire correspondence, involving hundreds of letters, in Wells Fargo's Safe Deposit Vaults in this City, as a permanent record of the results herein reported. Results per hundred are results per thousand, and are now simply cumulative.

We only invited reports during the demonstration, anticipating that after the reaction had started, and the albuminous waste was seen to be decreasing and symptoms softening, Physicians would continue thereafter as necessary. Hence many of the reports only cover the first month or so. As to character and permanence of results see fourth page for some cases in which albumen and symptoms were eliminated from five to twenty years ago, the patients still being about and active at last addresses.

And we call particular attention to the fact that both acute and chronic forms were reported as yielding, the term "chronic" apparently being no longer a bar where there is a fair heart and recuperative power. And what is also impressive is the fact that a number of the recoveries reported were in cases so extreme that tapping was required. One writer of National reputation goes back nearly 30 years to find a case of Bright's Disease in which recovery was reported after tapping. In view of this fact the writer asked a Specialist in Renal diseases, who had reported a number of recoveries in which he had to tap from two to twenty times, if he had ever seen a patient recover after tapping under any other treatment. He replied that he had not.

From nearly 300 reports, less than one-fifth of which state there were no results, we select the following as of particular interest. In those marked ††† the Physician was the patient, †† a member of his family, † a patient.

## Vice Pres. State Med. Assn. †††

Age 63, Nephritis, S. G. 1010, large quantities pale urine. Duration several years. Virility almost nil. Polyuria interfering with rest.

45 days later—"S. G. today is 1020 and for two nights now have had to get up but once. Not only feel better, but the virility is now all that could be reasonably asked. When our State Med. Assn. meets I shall tell them in a paper that will be heard over this State.

30 days later—"Am holding my own in all respects including virility. Have had my druggist stock it and am prescribing it with marked success."

Later—"Still improving. Am prescribing with gratifying results. Am preparing to specialize in Kidney with the Comp. for the next anchor."

Later—"S. G. now 1025, no thirst or other of the symptoms, virility what it should be. You may give my name to any Dr. who wishes to write."

## Illinois †††

Physician, age 50, Major, Medical Corps, U. S. A. Chronic Interstitial Nephritis.

First Report—"The alb. has decreased before, but have not felt it but this since beginning your treatment. It seems to be very soothing to the genito urinary tract. The blood pressure which was 187 systolic 2 months ago is now 160. I would like to see the casts again." (We are sending another 60-day course to that end.)

Second Report—"I found fruit acids brought back large traces of albumen. I turned in connected suits with an alkaline water. The Compound then produced immediate results and there is now no albumen; pus and blood cells are less; casts are decreasing and am feeling much better. I am prescribing."

Third Report—"Am continuing to make satisfactory progress. Albumen is rarely found now."

## Ohio †††

Physician writes, "It has been a pleasure to use your treatment in a number of cases with most gratifying results. Among my cases my father-in-law owes his life (acute Bright's Dis.) to your treatment. I am glad to express my very great satisfaction."

## New Jersey †

A Physician in a small place in New Jersey wrote for a demonstration, patient 28, alb. 4%, s. g. 1005. With his order for the third treatment he wrote, "Albumen has dropped 75%. All symptoms have disappeared. Rx 1 is wonderful and I will always use it. You will hear from me again."

We have since heard from him so often that our books show he has prescribed over 150 nine-day units, thus showing the important part it is playing in his practice. We would judge he is more or less specializing in kidney complaints.

## West Virginia †††

Dr. writes—"My wife 3 yrs. ago had Chronic Nephritis, carrying 40% alb. After taking one doz. of Rx 1 the alb. entirely disappeared and she remained perfectly well until last week when headache set in, and upon examination found considerable alb. again so started her on it at once. Send half doz. by express."

## Ohio †††

Doctor writes "Am 50 and have had albuminuria 3 years. Alb. 4% and is weighty feeling bad. If as represented will be delighted to use it."

40 ds later—"No analysis yet but I am feeling much better."

30 ds later—"I am out in half. Was hurt in auto accident and did not take it while in bed. Have only part of treatment left. Please favor me again. Will send detailed report later."

## Missouri †††

Age 28, albumen 9.2%, spec. grav. 1006, casts numerous, edema, 19 months duration.

One month later the Doctor noted "marked improvement in patient's general condition" and in due course reported following albuminous changes:—

Initial	Albumen	9.2%
2nd Test	"	5.5%
3rd Test	"	2.8%
4th Test	"	1.4%
5th Test	"	1.0%
6th Test	"	0.6%
7th Test	"	0.5%
Final Test	"	none

The Doctor wrote that the improvement the first month was out of all proportion to the albumen and that the rapid decline in the albumen thereafter was especially interesting. "The only other treatment was Blands Pills one t. i. d. with regulated diet."

Final Report, 30 days later—"Today there is not a trace of albumen and the condition of the patient has gone along with the improvement in the percentage. I consider this a perfectly marvelous recovery. Your preparation is head and shoulders above anything I have ever seen. I want to thank you for your cooperation in furnishing a thorough clinical demonstration, and I shall lose no opportunity to cite this case to my colleagues."

Later—"Since reporting the last case of Nephritis I have had another remarkable reduction under Comp. One. Will report this and some other cases in the future. Send literature to Dr. S.—I was showing him some of my case histories and he is much interested."

## Minnesota †††

Dr. writes—"My own case—Two diagnoses (1) Diab. insipidus (2) Interstitial Nephritis, S. G. as low as 1000 at times, both hyaline and granular casts. No alb., no sug. (On the theory of Nephritis we wrote we believed he would get results under Rx One.)"

There was an unusually quick response the Dr. reporting that following the first unit he began sleeping better and the s. g. was improved.

Second Report—"Gradual improvement in every way. S. G. at times reaching 1020 to 1022. Fine vigor."

Third Report—"Last tests negative in every way." The Dr. writing that he was prescribing.

## Pittsburg †

Dr. reports on a case of "sub-acute Nephritis." "Female age 32. Employed the usual Materia Medica and as a last resort gave Comp. Albumen has left, urine headaches and nervous symptoms have disappeared. Has gained 30 lbs. and is living comfortably. Am anxious to use it further and am writing for prices."

## California †

Dr. writes—"Two years ago I had a case of Cardio Vascular Renal disease in which I used the Rx for Bright's Disease. The I lost my case from Influenza I was so favorably impressed by its good work that now I wish to try it in my own case. What is the nearest point to me where it can be had."

## Arkansas †††

Surgeon writes, "Have been suffering with acute Bright's for nearly a year, lately some blood and sugar. Am on saltless and sugar free diet."

35 days later—"Alb. drops three-fourths, casts have disappeared, uremic and general conditions improved except blood in urina is still present. About out of the treatment, anxious to continue."

## Massachusetts †††

"I have a boy (19) seriously ill with acute Nephritis. Alb. 55% (bulk). Dropsical distention very excessive. Am wondering if your treatment will help."

30 ds later—"I believe he is improving. Albumen reduced about 5%. Edema is lessening, but is still great. Patient is in a very serious condition but I feel a little encouragement."

20 days later—"The patient is just beginning to show improvement that seems to be of an encouraging nature."

30 days later—"I am happy to be able to say the patient is doing wonderfully well. Until three weeks ago improvement was small, but since then a wondrous change has come about and I am firmly convinced that ultimate recovery is not too much to be hoped for. Later I will give more of the real facts."

90 days later—"I want to thank you for the most unexpected and thoroughly satisfactory results. His was the most desperate case of acute Nephritis I ever came in contact with that recovered. In bed 3 months, albumen 55%, casts of all descriptions, total 24 hours urine 1 to 2 ounces, edema frightful. All efforts were of no avail. In desperation I saw your circular, also, I did not have the slightest faith, but I have quite the contrary feeling now. Patient is now working, strong, good flesh, and feels perfectly well, urine 50 to 55 ounces. The daily routine now is diet, good living, with the Compound (1) in an effort to get rid of the remaining 1½% of albumen. The microscope now shows nothing pathological."

## West Virginia †

Female—age 57—Bright's Disease (contracted in kidney 10 yrs. ago) with iter with casts and some blood, violent headaches, muscular twitches.

First Report—"Alb. reduced one-third, pains less, muscular twitches about gone."

Second Report—"Alb. 4 grms. pr liter but sugar is now showing."

Third Report—"Alb. 1½ grms., sugar increasing altho she seems better and stronger."

Fourth Report—"Alb. 1 grm.—sug. continues to increase."

Fifth Report—"Considerable improvement since last report. Sugar that was abundant has disappeared. Alb. 1 grm, pus and blood none. S. G. 1020. General health good and sleeping well."

## Texas †††

Doctor writes: "My wife has a bad case of Bright's, advanced stage, albumen 20 to 25%, advanced edema, dropsical body, most every form of treatment has failed. This brief statement made the case look critical to us, our feeling being that edema covering entire body often indicates extremis, and so I have ever found that decreased the alb. and am encouraged. Dup. with bill. Received no report we feared he had not received it in time to get a reaction. However some months later the Doctor re-ordered and reported as follows:—

"I used the Compound in her case with the greatest satisfaction and gratifying results. The albumen disappeared and the case cleared up. She fully recovered her usual health."

## Arkansas †††

I am the patient, age 58, alb. ½ of 1%, blood pressure 175, some vertigo.

60 ds later—"Decrease in alb. 75% and 20 points drop in blood pressure."

Am better than when I wrote you last. Have gained 5 lbs. Send another course, C.O.D."

## Wisconsin †††

Am suffering with Chronic Bright's S. G. 1010, alb. 5%.

First Report—"Albumen has decreased over half and I feel quite a bit better. Have ordered a further supply."

## South Dakota †

Bright's. Extreme case; nearly moribund; age 70; albumen at times nearly solid, casts, urine scant, dropsy extreme (bowels and legs).

30 ds later—"Improvement slight but still hope."

30 ds later—"Patient slowing gaining."

50 ds later—"Dropsy is nearly gone. Was bedfast for a long time but is walking freely about the house. No abnormal urine constituents, good color and quantity about normal. Blood pressure at one time 200 is nearly normal, and in all he is in fair shape. He was almost moribund when you first treated. The patient, a highly respected citizen, (had been the rounds, 6 or 7 doctors,) is more grateful than I can tell you. Still on Comp., 1 with 4 Anasarcine tablets daily and a morning saline."

## Ohio †

Physician wired to San Francisco, suggesting urgency. Alb. 3%, marked edema, intermittent heart.

40 days later—"S. G. 1018, Alb. none. Edema none, heart quite regular. Cleared up rapidly, on your treatment. Will use it from now on."

## Alabama †††

The Doctor wired to San Francisco for Comp One due to the following—"About one-half of my urine coagulates on heat and acid test."

First Report—"I have been on the treatment for a month and albumen has disappeared. How long do you advise continuation?" Ans.—from two to three mos, last month on half doses.

But the Dr. suspended. Later he wrote "the alb. returned when I stopped. C. O. D. ½ dozen."

Later—"Dr.'s wife writes he passed away before the order arrived. Consulting physician confirms cause as apoplexy due to Chronic Bright's."

## Missouri †

A St. Louis Physician prescribed the Real Agent for a brother Physician with albuminuric Retinitis, age 58, alb. ½ of 1%, S. G. 1014. Hyaline casts, expressing the hope that it would do more for the patient "than the treatment he has been taking."

35 days later—"S. G. 1018, alb. trace, casts none, gaining in weight."

60 days later—"Improvement continues; duplicate."

## Massachusetts †††

Dr.'s son, 18 yrs. old, alb. 1½%, 7 yrs. standing, during some acute attacks urine solid in the glass. Some dropsy. If it helps you'll hear from me often. Fifth week—conditions improving, marked decrease in alb. (half) and still decreasing. This is the only thing I have ever found that decreased the alb. and am encouraged. Dup. with bill.

## New York †††

Female—"Bright's S. G. 1004. Alb. 2%. Casts, etc. If successful will use in all my cases."

1 mo. later—"We asked for report writing 'if you are getting the usual results, you should now find the albumen decreasing."

Reply—"Getting the usual results. C.O.D. 1 doz."

## West Virginia †††

Male—Albumen 5%.

40 days later—"At the end of the first half of the treatment—"The patient has gained 5 lbs. and albumen has reduced to a mere trace. I feel sure when he has taken the balance he will be free from the disease. I thank you and will prescribe."

Female—"Bright's S. G. 1003, Alb. 4%, general dropsy—unable to relieve her."

First Report—"Am pleased to report marked improvement—S. G. 1014, Alb. 2 per cent."







**Missouri** †††  
"I have been using successfully, for 7 years, your Compound for Bright's Disease both in my practice and in my family, having cured myself of Bright's."  
The Doctor writes that, five years before, she was treated by "Leading Seattle and Tacoma Physicians who sent her to Arizona giving her about six months."  
On the way through San Francisco she learned of this treatment. Two months later oedema and albu. had disappeared. The Doctor continued the Compound at intervals of two months for two years and the day she wrote she stated she was well, and without a trace of albumen.  
The Doctor writes she has "Prescribed it for no less than a dozen cases" but that in several of the last cases "it did not bring the brilliant results it formerly did" and she says if there has been a change, it is the formula. There has been no change. The Doctor simply met some of the failures that are bound to be encountered.

**Colorado** †††  
Chronic Nephritis—bad, have passed blood."  
First Report—"Have taken half. Feel better in every way. Alb. only a trace now. No casts or other unfavorable conditions."

**Missouri** †  
"I am sending you copies of urinalyses in 3 more cases. The first is discharged. The other I expect to discharge soon so far as the Nephritis is concerned altho I expect to keep them under strict observation for some time. I am coming to rely entirely on the Comp. for the urinary picture. The anæmia and heart receive due consideration. However, the Compound is the essential treatment in these cases. My results are spreading and the patients realize the increasing field of practice. The last patient came to me from Chicago on the advice of friends here. I do not hesitate to advise my professional friends to look into the preparation." The urinalyses follow:

1. (W. H.)	alb. 3.2%	Final test	alb. none
2. (W. B.)	"1.1%	"	"trace
3. (W. W.)	"0.1%	"	"none

**Minnesota** †††  
Conflict in Diagnosis, 1st, Interstitial Nephritis; 2nd, Diab. Insipidus. S. G. 1000 to 1012. With large quantities pale urine, casts, headaches, insomnia, nervous, Alb. weak bodily and at times mentally. "You are aware text books claim no treatment is of much, if any benefit." Send Rx 1.

1st Report—"While waiting found bottle Comp. 1 at local drug store, and began taking "since which time am sleeping better and S. G. averages better."

2nd Report—"There has been gradual improvement in every way."  
Nephritis in Extremis—"Patient (W. T. J.) one of our wealthiest men, had such marked oedema that he could not add breathe. In the face of a fatal symptom I decided to put him on two tablespoonfuls of Comp. 1 in water every four hours, day and night, and nothing else. Skim milk and water to drink. It was like the reports at St. It saved his life. The improvement was perceptible hourly. In a few days he will leave the house to attend to some pressing business matters." I learned this—give plenty or don't give any."

**Mississippi** ††  
Patient in Doctor's family, age 69, albumen 4% with retinitis. So far nothing has helped. Dr. N— advises me to put him on your treatment."

60 days later—"Albumen a trace, vision improved, can read newspapers again, could not tell me how much and how far feet away before beginning this treatment. Digestion formerly poor, now normal. Wonderfully improved in every respect. Duplicate with bill, will let him to continue."

(Note—Our record shows the Dr. N— referred to had previously gotten good results in a case in his own family, hence his interest.—J. F. Co.)

**Missouri** †††  
My own case—age 49, s. g. 1024, albumen 3%. Heart irregular, etc.  
First report—s.g. 1018. Albumen none. Heart better. Vision improved. Check herewith for duplicate.

**Nebraska** ††  
Following a course sent this physician for a case in his family we are in receipt of the following:  
2 mos. later—"I am using the Comp. in three cases of albuminuria with marked results."

**Missouri** †  
"On receiving your Bulletin, I ordered No. 1 immediately for a case of Nephritis that seemed to hold but little if any hope. She is doing well and I am writing for quantity terms. Send literature to my brother, Dr. — in adjoining county."

**Maryland** †  
Following a case of chronic Nephritis in extremis, with distended bladder, distended, in which Comp. 1 was given as the last resort, the physician reported a gratifying reaction at a very critical moment, and closed a race with it. I had the same confidence in Comp. 1 I have in calomel, opium, digitalis and other time-honored agents.

**Kentucky** †  
"I have two cases of Bright's Disease. Send 60-day course. If it does, justly will reorder." We sent treatment "for the most urgent case."

First Report—"At end of first half dozen albumen test is negative. Check herein for duplicate."

**Pennsylvania** †††  
First Report—Albumen 1%.  
Second Report—Albumen reduced—with general improvement.

**South Dakota** †  
This physician put 5 patients on the Renal agent (J. F. W.) 1st Report S. G. 1002 Alb. 5%.  
2nd Report—S. G. 1010 Alb. 6%—all symptoms improving.  
3rd Report—S. G. 1010 Alb. 1%—dropsy reducing.  
4th Report—S. G. 1010 Alb. 1½%—dropsy practically gone and symptoms improved in every way—except micturitions, still uncon-trolled.  
2 (D. J.) 1st Report S. G. 1012 Alb. trace.  
2nd Report—S. G. 1024 Alb. none—"symptoms all relieved."  
3 (M. P.) "More relief than anything she has taken."  
4 (H. H.) First month showed improvement but later subsided.  
5 (A. P.) Failure—no details given.

**Washington** †  
Physician orders for a case of Nephritis. Patient at one time unconscious and totally blind with retinitis and locked upon as hopeless." The Doctor is already getting response and sends for the Compound to aid closing—"It has helped me with 3 bad ones and I expect it to do so again."

40 days later—Patient left here to join her husband, feeling and seeing better than she had for three years, with a blood pressure of 104 (54 years old) and ½ of one per cent of albumen. Letter to her children here report her still feeling fine."

90 days later—"The patient I wrote you about (blind, unconscious; alb. 7%, etc.) was in the hospital for some time. Little bile in the urine—that the anæmia is doing better than for ten years. Have a case now that is a corker. Have taken 21 quarts of fluid from the abdomen. (6, 9 and 6 with a drain to hear from doctor). Check herewith for another dozen. Please get action. I need it."

50 days later—Referring to the critical case last mentioned the Dr. writes—"I was called after a consultation in which two physicians had given up. This was a giant anasarca. He was tapped three times. Pulse 48, urine so bloody it clotted, alb. 12%. Last test alb. less than 1%, no blood, dropsy not evident. Went to 5 in. above ankle and he has splendid color. Not cured, not even well but his general health is as good he has been fishing and driving an auto and otherwise enjoying himself for over a month and I have little doubt of his recovery."

Two weeks later—Referring to last case—"Alb. is but a trace and patient is going to work."

**North Carolina** ††  
Doctor sent for the treatment for case, age 27 with 3% of albumen. S. G. 1028. (The patient was in a critical condition that the first letter did not disclose, viz.: there was oedema with heart so enlarged patient could not breathe naturally and had to sleep part of the time sitting up.)

Four weeks later—"She seems to be improving nicely, albumen has decreased to 2%, feeling better, the oedema is diminishing considerably, and breathing is normal. No casts at present, headaches and spots before the eyes have disappeared. I believe with continuance of the treatment she will make a complete recovery."

**Washington** †  
"Have a patient, a dear friend, (61) with Chronic Interstitial Nephritis. Has suffered 2 years. Urine scant, albumen 2 to 7%, shortness of breath, insomnia, losing weight, palpitations, etc."

Sixty days later—"There was a change the first 10 days: sleeping better, appetite improved, palpitation less, urine increased to 4 pints, albumen disappeared. To me a remarkable improvement. Since then he has improved when stricken with Influenza. You have a valuable preparation that I believe would have given her years of comfortable life. I wish she had escaped the scourge influenza."

**Chicago** †  
Physician writes—"I wish to report case of Bright's, girl, age 19, dropsy pronounced, menses stopped. I got the Compound under control and menses restored the twelfth month. At that time did not know of your treatment. About four months ago patient returned for treatment. menses stopped, albumen 5%. Gave her Comp. one, tablespoonful doses four times a day. Seventh week albumen disappeared, menses reappeared and regular since."

**Colorado** †  
"I have suffered with Bright's Disease nearly two years. Albumen 3%. Am doing a little office practice, but no riding."

First Report—"Have taken it almost continually for five months. For about three months could not exercise due to dropsy in action. Since then the albumen has almost gone, a trace left, no casts, and feeling much better." (Another of the cases that accent the necessity for patients to get J. F. Co.)

**Arkansas** ††  
Female—Bright's Disease.  
First Report—"Patient is apparently better; albumen about 8 per cent. Am also giving her Compound. Her mother says she has kidney trouble with abdominal dropsy. He has begun to improve. Two other physicians here and two at Hot Springs had failed to help him."

Second Report—"The Doctor writes his male patient has "entirely" recovered and he is putting another case on it. He closes—"Write Dr. W. I told him about it."

**Missouri** †  
Physician writing from his Health Board says—"Have a case of albuminuria, over 2%, acute."

First Report—Patient doing fine. There is a marked diminution of albumen since receipt of your Renal agent for which I am very grateful. Patient is up and about but not working.

**Vermont** ††  
First Report—Albumen 4%.  
5 weeks later—Albumen 1%—"with general condition improving."  
Two months later—Albumen none. "Patient at work apparently, as well as ever. Am much pleased."

4th Report—"Put a new patient on it (albuminuria) with prompt response. Am putting a third patient on it showing "quite an amount of albumen."

5th Report—"The case last reported is doing finely. Alb. only a trace—wasting has ceased. Urine is good. The patient in two cases continue well with no trace of albumen. The treatment has more than met my expectations."

6th Report—"Just had a case nearly solid albumen. Yesterday (2 weeks later) it was less than 1%."

7th Report—Referring to a new case closes—"The other cases are continuing without a trace of albumen and are apparently well."

**Wyoming** †††  
"Like most practitioners have been careless about my health. Was out in the cold and exposed night and day for 120 days during the "flu" epidemic and my kidneys went bad. On May 4, 4 per cent, some casts, pressure 146. Have been oedematous since, lost few mos., and treatment not very satisfactory."

30 days later—"Am glad to report good improvement. Oedema is almost gone, only a trace of albumen and general health improved; amount of urine increased and rarely have the headaches now. When I began the treatment could hardly button a No. 17 collar. A 16 had been my size for 3 years and at this time a 16 is again plenty large."

**Los Angeles** †††  
"I would very much like to try your treatment as I have been the rounds for 4 years. S. G. 1040, 4 per cent, some casts, oedema, etc., smothering some of the time, requiring me to sit up part of the time. My mother died of chronic Nephritis. Have quit my office and am in the country."

Excessive dropsy with shortness of breath due to enlarged heart requiring patient to sleep sitting up presented an ugly situation and the Doctor could not wait but had already reached the point where the situation arrived. With heart measures and Salines thirty pounds of water were eliminated, the Doctor's first report closing—"I am very much better. Blood has disappeared but alb. (3%) is yet the same."

Second report—"Am still improving—My weight now 162 lbs. was 200 when I started taking."

**Iowa** †  
"I have a case of Bright's Disease (an attorney) on the Renal formula and gaining wonderfully but what worries is the eye sight. S. G. 1020, 4 per cent, no casts, no albumen, what chance has he? I wish to say however, that since taking the Compound this condition is no worse—it seems to have checked the failure of vision."

By vision, a number of reports involving retinitis (three had progressed to blindness) in which the vision was reported to have returned as the albumen disappeared. But we were unable to get a permanence altho two or three cases were reported as still living and functioning visually a year or two later.—J. F. Co.)

**Texas** †  
Physician reports three cases:  
Mrs. H., albumen 50% is now 10%. Gaining in weight and able to do her house work."  
Mrs. C., albumen 33% is now 4%. Looks and feels well.  
Case 3, four-year-old child, albumen solid, body puffed to twice its normal size, did not think she could live thru the night. Albumen now 6%, swelling almost entirely gone.

Bright's, female; heart weak and fast, high blood pressure with oedema of bowels and limbs.  
60 days later—"Oedema almost gone, pulse stranger and slower. B.P. lower. Chronic conditions have disappeared. Strength seems nearly normal."  
10 days later—"Mrs. S. has about recovered from her oedema. She is fine, time, and no oedema. Check herewith for duplicate."

**Washington** †††  
"I still have small quantity alb. and Sug, but am so much better it does not worry me in the least. If my practice would permit me to diet properly believe it would disappear in a short time. You state it acts on some cases of Bright's. It has that effect on me to a marked degree."

**Pennsylvania** †  
First Report—"Am agreeably surprised at the results in a case of Chronic Bright's. Patient a female, 40 years (third week) is out of bed again and partly doing her own work."  
2nd Report—"Am well pleased at the results. Have not yet used it long enough to judge of the permanency. Am giving it several more cases. I am anxious to know like this will be found on last page in some cases that were still living 5 to 20 years after critical symptoms were abated.—J. F. Co.)

**France** †  
A Kidney Specialist who has had a large number of cases reports that among them he has successfully treated more than a half dozen cases of Bright's Disease that had progressed so far they had to be tapped from 2 to 8 times, and that he never knew of a recovery in a case of Bright's Disease after tapping on any other treatment. (This does not imply that the physician had a false case, such must be heavy in these extreme cases but it does mean that such frequently justify a hard fight.—J. F. Co.)

**California** †††  
A San Francisco physician reports progress in his own case and adds that in a case of acute Nephritis in which he prescribed the Renal Rx that the alb. was reduced and patient so improved that she did not find it necessary to consult him for a considerable period. This physician was also in personal touch with a case that was of particular interest—viz., Bright's Disease in which the dropsical condition was so severe that tapping was required. Had been tapped several times when this agent was added to the treatment. The dropsy gradually responded making further tapping unnecessary. The patient, a young girl made a record and is apparently well and has been for over a year. The result of this case caused the Doctor to observe that he never before knew of a recovery in a case of Bright's Disease "that was so critical as to require tapping."

**Georgia** †  
The physician reported a "very weak" patient with the unusually low specific gravity of 1000 and 50% of albumen. He ordered the treatment and with his usual anxiety about the results in a case showing as low as 1000 S. G. with extreme weakness and such a large amount of albumen and desiring to keep in mind the possibility of the use as under the demonstration of the Compound, the course. The reaction came earlier than usual. On the second test the S. G. had increased to 1012, the albumen reducing half. The third test recorded a further improvement. The albumen, specific gravity of 1020. Patient again able to do housework. The Dr. closes "it acted like a charm."

**Massachusetts** †††  
Physician's son, 18, alb. 2%. 7 yrs. duration, alb. alb. 4% to 5%.  
45 days later. Marked decrease in alb. (now about half.) This is the only thing I have ever found that has decreased the alb. Duplicate C. O. D.

**Massachusetts** †††  
Dr. writes—"Have cured Albunimuria 3 years. A friend suggested your preparation." Twenty days later Dr. reports "alb. 7½% has reduced over half and am feeling better in every way."

**South Carolina** †††  
"Have had alb. with blood since the flu in Feb., 1920. Hope it will help me as your reports show it has helped others."

40 days later—"Am stronger and feeling better. Blood has disappeared but alb. (3%) is yet the same."

30 days later—"My condition is more satisfactory and wish to continue. Check herewith for reorder."

60 days later—"The albumen has disappeared—feeling good and strong. Check herewith for another supply to taper off on. I feel very grateful."

**San Francisco**  
Bright's Disease—after tapping. The patient, a youth had been tapped several times in a local hospital—when the attending physicians gave the mother no further encouragement and he was taken away. Before the wounds made by the trocar had healed his filling again. The physician called at this juncture put him on the Renal Agt. (Rx 1) with heart measures and eliminatives. The result was a complete recovery in three weeks requiring several more tappings. Albumen then declined and dropsy gradually diminished and two months later the physician consented to his being taken home. The youth was at school four years thereafter.

**San Francisco**  
Not contemporaneous but presented to show the results of the crisis in the treatment. Chronic Interstitial Nephritis in extremis. The resources of various practitioners had been exhausted and the patient was in coma at the end of a year's struggle; weight reduced to 100 lbs. and the patient was decided to try the Renal agent (Rx 1). As nothing was being retained by the stomach, patient was fed and treated per rectum. The physician emptied the bowels with the high tube and an emulsion. A little champagne and cracked ice was all that was given to the stomach for days. Rectal injections of the following were given through high tube (14 inch) every four hours, day and night.

Rx—Somestoe Drums 1  
Bovine Oxs. ½.  
Salt Gs. 10.  
Milk Oxs. 4.  
Fult. Comp. (Rx 1) Ozs. 1.  
One Egg.  
One tube of pancreatin.  
(Mix to heat, so as not to coagulate albumen.)

Cardiac stimulants were administered hypodermically. Patients bowels were emptied every morning preparatory to morning feeding giving the active infusion of senna by the high tube which was very obstinate. Patient was given two injections of the Renal agent. It is to be observed that the rectal feeding carried the Renal Comp. Following the first 24 hours the Renal functions began to respond mildly. The third day the urine passed from 18 ounces to 3 pints. The oedema gradually ceased, albumen reduced with increased urea and eyesight began to return. Improvement continued for nearly 60 days when patient declined against the strenuous objection of the physician, to go South for a change of scene. As was feared, he left too soon and had a relapse and although efforts were made to keep him in the treatment, the patient passed almost immediately upon arrival. It was the belief of the physician that the battle was won and recovery would be assured had the patient followed his instructions another 30 to 60 days.







We hand you RENAL DIGEST as requested.

We recently concluded a demonstration to the Physicians of America, the results of which must be of profound moment to all concerned directly or indirectly with Bright's Disease. We tried to reach every Physician in the United States having Bright's Disease himself or in his family. Nearly 300 responded, some involving dropsy and some reporting they had tried nearly everything else without results. All were served with a 54 day treatment. It will be seen that their reports, epitomized in the DIGEST, overwhelmingly attest the ability of this agent to reduce albumen and symptoms in Bright's Disease.

An interesting feature of the correspondence is the number of Physicians who put two patients on the treatment and reported both as responding. See sheet enclosed.

Note particularly the number of cases in the DIGEST in which tapping had been resorted to. The writer never knew of a recovery under any other treatment in a case requiring tapping.

The use of this treatment is simple. If the heart is affected or there is dropsy and the patient is taking the usual treatment to moderate those symptoms, it may simply be added. But where the patient is merely on diet, the Compound is taken alone. Where there is constipation, it is well to aid by keeping the liver and bowels comfortably acting.

Results may show a little the first week but usually between the tenth and twentieth days by decreasing albumen and a little later by gradual softening of the symptoms. Frequently this is reversed, patient beginning to feel better before the albumen shows much response.

Counselling patience and adherence to diet and careful living, and anticipating the usual results,

Yours very truly,

JOHN J. FULTON COMPANY

P.S. - Important retail drug stores in all large cities and the principal wholesale druggists thruout the country now carry this Compound. If for any reason you are not promptly supplied with this treatment (FULTON COMPOUND Rx 1) at \$1.50 per bottle, if you will write us we will give you the address of some nearby wholesaler who will supply your local druggist.

Most of those having Chronic Brights do not know anything can be done and many are resigned. As you begin to mend won't you kindly help us get this message before them by telling any you may know of this treatment? Or if you will send us the addresses we will mail the literature.

THEORY OF THE DIFFUSION OF SUBSTANCES THROUGH POLYMER FILMS

The theory of the diffusion of substances through polymer films is based on the Fick's laws of diffusion. The first law states that the rate of diffusion is proportional to the concentration gradient. The second law states that the rate of change of concentration is proportional to the divergence of the diffusion flux. These laws can be used to derive the diffusion equation, which is a partial differential equation that describes the concentration profile of a diffusing substance as a function of time and position. The solution of the diffusion equation depends on the initial and boundary conditions. For example, if the initial concentration is zero and the boundary concentration is constant, the solution is given by the error function. If the initial concentration is constant and the boundary concentration is zero, the solution is given by the complementary error function. The diffusion equation can also be used to calculate the time required for a substance to diffuse through a polymer film of a given thickness.

The diffusion of substances through polymer films is an important process in many applications, such as the packaging of pharmaceuticals, the separation of gases, and the transport of ions in membranes. Understanding the theory of diffusion is essential for designing and optimizing these processes.

The diffusion of substances through polymer films is a complex process that involves many factors, such as the nature of the diffusing substance, the properties of the polymer film, and the environmental conditions. The theory of diffusion provides a framework for understanding these factors and their effects on the diffusion process.

The diffusion of substances through polymer films is a topic that has been studied extensively in the literature. Many experiments have been conducted to measure the diffusion coefficients of various substances in different polymer films. These experiments have shown that the diffusion coefficient is generally higher for small, non-polar molecules than for large, polar molecules. The diffusion coefficient is also affected by the temperature and the thickness of the polymer film.



## OF PARTICULAR INTEREST

were cases in which Physicians put two patients on the treatment both getting results. Reports showing similar results in both cases cumulatively attest the ability of this agent to reduce albumen and symptoms in Bright's Disease. For instance:-

CALIFORNIA - Dr. M's report on two critical cases involving tapping. (1), boy, 6 yrs. Dropsy obstinate requiring eightappings. (2), a mariner, albumen solid and dropsy so persistent twenty-oneappings were required. Results were very slow but the Doctor ultimately reported recovery in both cases.

CALIFORNIA - Dr. P. in person reported several recoveries, his last being particularly interesting - involving retinitis, convulsions, albumen solid and dropsy requiring threeappings, 34 lbs. of water being taken at first tapping. The Doctor reported patient's return to business the fifth month.

WASHINGTON - Dr. reports recoveries in two extreme cases. (1) Patient "at one time unconscious, totally blind with retinitis and looked upon as hopeless. It has helped me in 3 bad ones and I expect it to do so again". 90 days later albumen trace, sight returned and patient left for home. (2) Condition critical, albumen 12%, pulse 48, urine so bloody it clotted. Dropsy excessive, tapped three times taking 6, 9 and 6 quarts. Rush treatment." 70 days later - "albumen trace, patient going to work".

SHANGHAI - The Doctor reports six cases "without a failure". The last was in a critical condition. In bed a year. Pulse 160, albumen and heavy casts. Oedema excessive. The patient was at the steamer to see him off on his visit to America.

MISSOURI - The Physician after getting a recovery in the case of a relative (chronic Bright's Disease) commenced prescribing. Following is one of his subsequent letters. "I am sending you copy of urinalyses in three more cases; two are discharged. The other I expect to discharge soon; viz.-

Case 1 (W.H.)	First test alb.	3.2%	Final test	none.
Case 2 (W.B.)	" "	2.1%	" "	trace.
Case 3 (V.W.)	" "	1.6%	" "	none.

OHIO - "It is doing the work. Albumen 4% has dropped nearly 90% and have several patients on it with good results."

MONTANA - "Am getting good results in two very obstinate cases of Bright's and general dropsy. Have been prescribing it with satisfactory results."

WYOMING - Dr. after reporting recovery in his own case, writes, am also "prescribing it with marked success".

MISSOURI - Physician writes, "I have been using your treatment for Bright's Disease successfully for years both in my practice and in my family, having cured myself of Bright's".

IDAHO - Physician writes, "I have yet to see a case in which it has not done good".

STANDARD REGULATIONS

NOTING NEW DISCOVERY AND TO BE REMEMBERED BY ALL MEMBERS OF THE SOCIETY  
THAT THE FOLLOWING REGULATIONS ARE TO BE OBSERVED BY ALL MEMBERS OF THE SOCIETY  
AND THAT THE FOLLOWING REGULATIONS ARE TO BE OBSERVED BY ALL MEMBERS OF THE SOCIETY

1. (1) The following regulations are to be observed by all members of the society

2. (2) The following regulations are to be observed by all members of the society

3. (3) The following regulations are to be observed by all members of the society

4. (4) The following regulations are to be observed by all members of the society

5. (5) The following regulations are to be observed by all members of the society

6. (6) The following regulations are to be observed by all members of the society

keys) are only functioning properly when the diffusion of substances through



ON CHARACTER AND PERMANENCE OF RESULTS

SOME WRITERS GO BACK 30 YEARS TO FIND A CASE OF BRIGHT'S DISEASE IN WHICH RECOVERY WAS REPORTED AFTER TAPPING. TO ACCENT THE NEW RESULTS NOTE THAT MANY CASES WERE SO CRITICAL AS TO REQUIRE TAPPING FROM TWO TO TWENTY TIMES.

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(Dr. I. M. P. - patient G. W. K.) Albumen so heavy the tube solidified. Dropsy excessive. Had to be tapped twice, 34 lbs. of water being taken at first tapping. There was retinitis and case had reached the convulsion stage. Following the change of treatment to the Renal agent, with heart measures, albumen and dropsy gradually declined and eye sight returned. The fifth month Dr. P. reported the patient's recovery and return to business. This was in 1905. At last advices, 14 years later (1919) patient left for Oregon in his usual health.

(Dr. L. M.) Patient boy (A) had been tapped several times in a local hospital and was again filling rapidly. The house physician gave the family no encouragement and they decided to take the youth home. Dr. M. was called. Wounds made by the trocar in tapping had not healed when treatment was changed to include the Renal agent. Results were in doubt for three weeks requiring several more tapplings. Albumen then declined and dropsy diminished. Two months later the Physician reported the boy as normal. This was in 1911. The Doctor reported the boy at school at last advices in 1915.

(A. G. B.) Albumen heavy, nervous system depleted with partial paralysis, patient on crutches. Prognosis distinctly unfavorable when the treatment was changed to the Renal agent. Thereafter the weekly tests showed declining albumen with corresponding physical improvement. The albumen was finally eliminated and crutches discarded. This was previous to 1905. At last advices, over eighteen years later, (November, 1923) the patient (a druggist) strong and active, behind his counter as usual.

(H. W. W.) Bright's Disease with dropsy so excessive patient had to be tapped three times. Attending Physicians felt there was no hope but the Renal Compound was given. There was an unusually early response, reaction beginning within a few days. She did not have to be tapped thereafter and the third month was reported about her usual activities. This was in 1914. At last advices eight years later (1922) same report.

(R. C. P.) Patient, boy, age nine, usual albuminous and dropsical showing. Patient became so swollen a fatal termination seemed inevitable. The treatment was then changed to the Renal agent. Dropsy and albumen were eliminated in due course. Analyses by two independent Physicians confirmed the disappearance of the albumen and casts, normal s. g. 1022. The results appearing unreasonable, the youth was stripped and examined from head to foot, confirming the recovery. This was in September, 1902. November, 1923, twenty-one years later, patient is a robust, active business man on Battery Street in this City.

(Mrs. W. E. H.) Bright's Disease involving the usual albumen with dropsy. Dropsy became so excessive tapping was necessary to prolong the patient's life. Patient had been tapped three times and was again bloating when the Renal agent was given. Further tapping became unnecessary, the dropsy gradually yielding and some months later patient was about her usual avocations. This was in 1902. At last advices, sixteen years thereafter (1918) patient had remarried and was living in this City.

(R. M. W.) Patient, editor of a local magazine, albumen with the usual symptoms. Case resisted treatment and patient was sent South in the hope that the climate would help. Patient dropped 35 pounds in weight and was still declining when the Renal agent was resorted to. Case gradually responded weight and strength returned. This was in August, 1901. At this writing (November, 1923) twenty-two years later, the patient is at his desk in this City in his usual vigor, weight over 200 pounds.

The first of these is the "General" or "Universal" principle, which is the foundation of the entire system. It is the principle that all things are made of matter, and that matter is composed of atoms. This principle is the basis of the entire system, and it is the principle that all things are made of matter, and that matter is composed of atoms.



## BLOOD PRESSURE IN BRIGHT'S DISEASE.

Physician, who has chronic Interstitial Nephritis, asks whether this Compound should help or hinder his blood pressure.

As dropsy, common in these cases, is due to excessive blood pressure forcing the thin aqueous constituents of the blood thru the veins and cell walls into the tissues, and has been shown to respond to this agent, it follows that declining blood pressure in these cases is not only a logical sequence but automatically follows declining dropsy, as shown by reports like the following:

SOUTH DAKOTA - Bright's, critical; nearly moribund; albumen heavy; dropsy extreme. Response slow but the Physician's 4th report showed normal as to albumen; dropsy nearly gone; blood pressure, at one time 200, reduced to normal.

PENNSYLVANIA - Physician reports on case Bright's, as follows: Albumen less; S.G. 1020 (was 1012); blood pressure 140, was 160; gradual improvement.

OREGON - Doctor writes, "Dropsy almost gone; blood pressure lower; ureamic conditions have disappeared; no albumen or casts for some time."

ARKANSAS - Physician reports decrease in albumen 75% and 20 points drop in blood pressure.

(Nothing is claimed for this preparation in high blood pressure caused by Arterio Sclerosis (hardening of the arteries) or from any cause except the abnormal blood pressure caused by inflamed kidneys resisting the movement of the blood thru them that is often met with in Bright's Disease.)

## RETINITIS IN BRIGHT'S DISEASE.

In cases of Bright's Disease which have developed Albumenuric Retinitis (blindness or suddenly failing vision) some writers take a very hopeless view. But it will be seen from the following that this aspect also is reported to have yielded with the other symptoms and in some very hard cases. For instance:

CHICAGO - We condense this Physician's six page report to the following: Hospital case of Bright's Disease; albumen very heavy; dropsy from head to feet; constant nausea; impaired vision; 24 hours elimination but 10 oz.; "the usual picture of a so-called hopeless case." The patient had been in the hospital under treatment six weeks. Had been carried in unconscious and had failed to respond to treatment further than to regain consciousness when this Physician was called and on taking charge put the patient on maximum doses of Fulton Compound Rx 1 with other measures the symptoms called for. "At the end of the first week the improvement was so definite the hospital Physicians could hardly believe it so they took his blood pressure and examined his eyes, the patient having stated that improved vision and loss of nausea were the first changes he noticed." (Very unusual as improving vision within our experience comes much later. J.J.F.Co.) The dropsy disappeared without tapping; albumen disappeared; all symptoms yielded and patient was in business at last advices.

MISSISSIPPI - "69, albumen with Retinitis." Doctor writes - "So far nothing has helped." 60 ds. later - "Albumen trace, wonderfully improved in every respect. Can read newspapers again. Could not tell one person from another four feet away before beginning this treatment."

WASHINGTON - "The patient I wrote you about (blind, unconscious, albumen 7%, etc.) was in the office today. Little bile, that's all. Feeling better than for 10 years."

EXPERIMENTAL INVESTIGATION OF THE EFFECTS OF  
VIBRATION ON THE HUMAN BODY

The purpose of this investigation was to determine the effects of vibration on the human body, and to establish a basis for the design of vibration isolation systems.

The investigation was conducted in two parts. The first part was a review of the literature on the subject of vibration and its effects on the human body. The second part was a series of experiments designed to determine the effects of vibration on the human body.

The first part of the investigation was a review of the literature on the subject of vibration and its effects on the human body. The following is a summary of the results of this review:

The review of the literature indicated that vibration can have a number of effects on the human body. These effects can be divided into three main categories: (1) effects on the nervous system, (2) effects on the cardiovascular system, and (3) effects on the musculoskeletal system.

Effects on the nervous system include changes in heart rate, blood pressure, and respiration rate. These effects are usually temporary and disappear when the vibration ceases. However, prolonged exposure to vibration can lead to more serious effects, such as chronic fatigue and nervousness.

Effects on the cardiovascular system include changes in heart rate and blood pressure. These effects are usually temporary and disappear when the vibration ceases. However, prolonged exposure to vibration can lead to more serious effects, such as chronic fatigue and nervousness.

Effects on the musculoskeletal system include changes in muscle tone and posture. These effects are usually temporary and disappear when the vibration ceases. However, prolonged exposure to vibration can lead to more serious effects, such as chronic fatigue and nervousness.

The second part of the investigation was a series of experiments designed to determine the effects of vibration on the human body. The following is a summary of the results of these experiments:

The experiments were conducted in two parts. The first part was a series of experiments designed to determine the effects of vibration on the human body. The second part was a series of experiments designed to determine the effects of vibration on the human body.

CONCLUSIONS AND RECOMMENDATIONS

The results of this investigation indicate that vibration can have a number of effects on the human body. These effects can be divided into three main categories: (1) effects on the nervous system, (2) effects on the cardiovascular system, and (3) effects on the musculoskeletal system.



## CASTS IN BRIGHT'S DISEASE AND NEPHRITIS

Realizing that the presence of casts in the urine in chronic Bright's Disease and Nephritis is generally considered as unfavorable to recovery we here group some reports in this class of cases recording the disappearance of the casts with the other symptoms:

ILLINOIS - Bright's Disease, critical; female, dropsy head to feet.

Laboratory reports, a week apart:

1st	S.G.	1032	Albumen	13%	Casts fair number
2nd	S.G.	1019	"	12%	Casts few
3rd	S.G.	1032	"	9 $\frac{1}{2}$ %	Casts moderate
4th	S.G.	1021	"	1 $\frac{1}{2}$ %	Casts none

7th Patient sitting up

MASSACHUSETTS - Male, 19, acute Nephritis; Alb. 53% (bulk); dropsy excessive; casts of all descriptions; in bed 8 mos.; all efforts of no avail. Third report - "A wondrous change has come and I look for recovery." Final report - "Patient is now working and feels perfectly well." xxx "The microscope now shows nothing pathological. His was the most desperate case I ever came in contact with that recovered."

MINNESOTA - Doctor writes - "My own case. S.G. as low as 1000 at times with both hyaline and granular casts." 2nd report - Gradual improvement in every way. 3rd report - "Last tests negative in every way. I am now prescribing it."

SOUTH DAKOTA - Case in extremis, bed-fast, nearly moribund. Age 70; Alb. at times nearly solid in the tube, with casts, scant urine, dropsy extreme. Final report - Patient is walking freely about the house; dropsy is nearly gone; urine good color, quantity about normal and no abnormal urine constituents.

KENTUCKY - Physician is the patient and wrote from his bed. Had not been to his office for a year. Usual albumen and casts with ureamic convulsions. Third report - "Improving nicely, can walk about; no ureamic convulsions since starting; albumen less; casts disappearing." Final report - "Am in active practice again. Think I'm about well."

NORTH CAROLINA - Age 27, albumen 3%. Heart so enlarged patient could not sleep naturally, having to sleep part of the time sitting up. Four weeks later - Albumen decreased one-third; dropsy diminishing and breathing about normal; no casts at present and the eye symptom has disappeared. "I believe she will make a complete recovery."

SHANGHAI, CHINA - An American physician practicing in Shanghai reporting six cases of Bright's treated by him "without a failure" gives details of one as follows: "Member of a wealthy family. Had been in the hands of some of the best European physicians in Shanghai. In bed a year; heart seriously involved; pulse 160; usual albumen, heavy casts, oedema excessive. I put her on Rx 1 with salines. The third week the albumen and casts reduced to a trace. Later, the dropsy disappeared and shortly thereafter patient was out of bed."

(Note - The reduction in casts noted the third week was unusual. It is well to note that in a majority of these cases the reports show reduction in casts require considerable more time than this case records hence patience is important. J.J.F.CO.)

# RESEARCH ON THE EFFECTS OF STRESS

STRESS is a state of mind or body which is characterized by a feeling of tension or strain, and is usually accompanied by physical changes in the body.

STRESS can be caused by a variety of factors, including physical, chemical, and psychological factors. It can also be caused by a combination of these factors.

STRESS can have both short-term and long-term effects on the body. Short-term stress can cause a variety of physical symptoms, including increased heart rate, increased blood pressure, and increased respiration rate.

Long-term stress can cause a variety of physical symptoms, including increased heart rate, increased blood pressure, and increased respiration rate. It can also cause a variety of psychological symptoms, including anxiety, depression, and irritability.

STRESS can also have a variety of effects on the mind. It can cause a variety of psychological symptoms, including anxiety, depression, and irritability. It can also cause a variety of physical symptoms, including increased heart rate, increased blood pressure, and increased respiration rate.

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A Quantitative Analytical Report is a Finding of Fact  
and Facts are Unimpeachable.

Physicians of all schools have sent in reports from nearly all the States. Here is another dozen cases of Bright's Disease in which the physicians report total disappearance of albumen under this treatment:

West Va	Albumen	4.0%	Final none
Mo.	Albumen	9.2%	Final none
Texas	Albumen	20.0%	Final none
So. Dak.	" tube solid "		Final none
Ohio	Albumen	3.0%	Final none
Chicago	Albumen	5.0%	Final none
Mo.	Albumen	3.2%	Final none
Mo.	Albumen	3.0%	Final none
Wash.	Albumen	7.0%	Final none
Vermont	Albumen	4.0%	Final none
Georgia	Albumen	5.0%	Final none
So. Car.	Albumen	3.0%	Final none

A quantitative analytical report is a finding of fact and a fact is unimpeachable and this vital, revolutionary fact is here - ALBUMEN IN BRIGHT'S DISEASE IN BOTH ACUTE AND CHRONIC FORMS IS POSITIVELY BEING REDUCED BY FULTON COMPOUND Rx 1, as certified above and confirmed by thousands of urinalyses. The impossible cannot happen even once. There are no miracles. Everything that happens is under law and under the same conditions the same law must operate in the same way continually. There is no such thing as a negative fact. Every fact is affirmative and a mass of professional reports from Physicians representing all Schools and Societies is on deposit in this City as an unanswerable record for all time that wasting albumen in Bright's Disease in both acute and chronic forms is responding to this treatment.

As to what the disappearance of albumen means in Bright's Disease, it is common knowledge that the case is yielding when the albumen is diminishing. And that is just what is happening, and patients are living today who eliminated the albumen, casts and dropsy 10 to 20 years ago. Nothing else in the world that we know of is showing cases like these. Some of the reports cover cases that had been tapped as will be seen in the DIGEST.

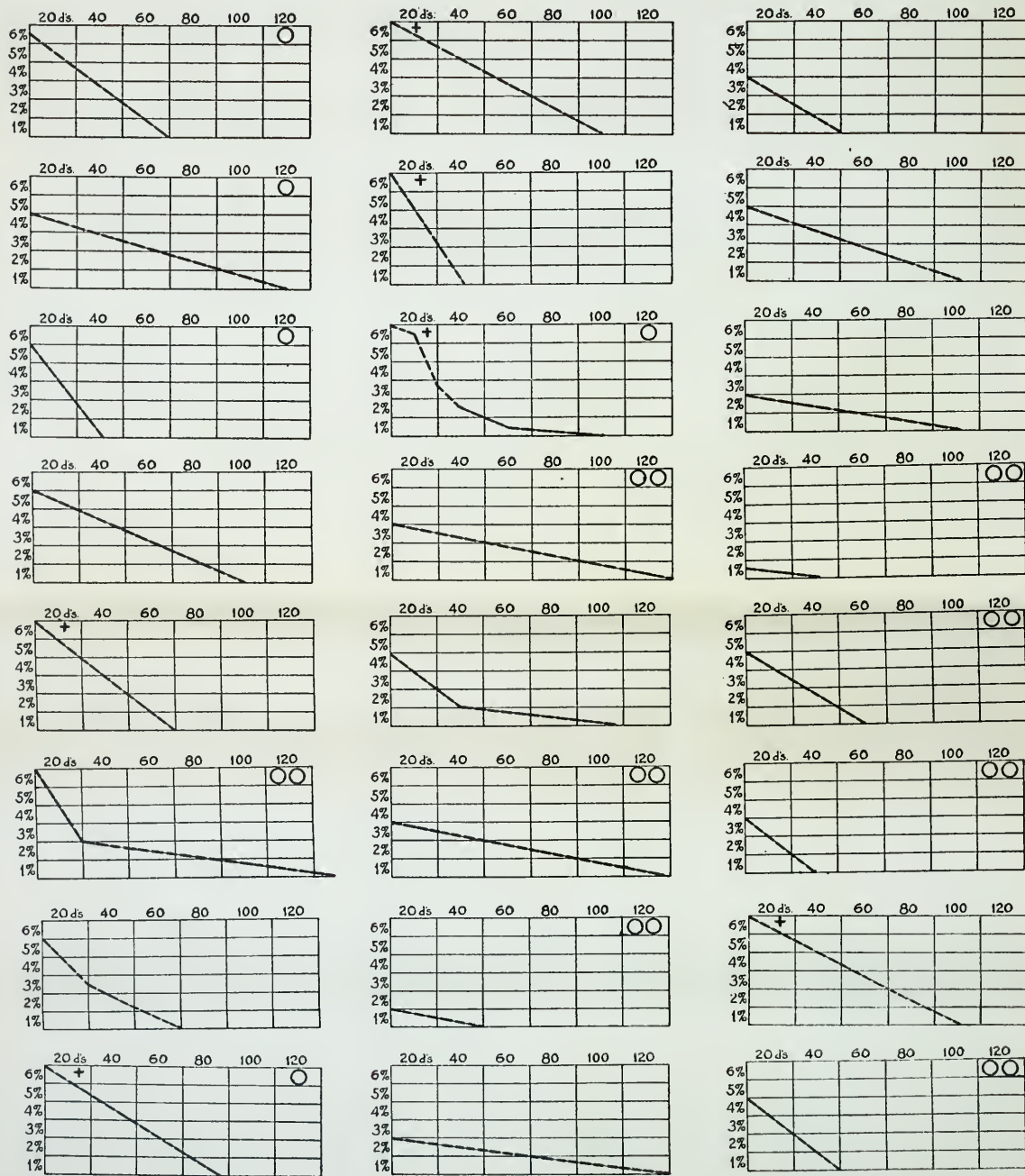
Over 80% of hundreds of professional reports record the usual response to the treatment in patients having fair hearts and 60 to 90 days of life remaining. May be taken with the usual heart and eliminative treatment given in such cases. Is taken alone if patient is simply on diet. Can commence looking for a little decrease in the albumen in most cases between the 10th and 20th days, followed shortly thereafter by improvement beginning to show in one or more of the physical symptoms. Frequently this is reversed, the patient beginning to feel better before the albumen shows much response.

As the action is commonly deliberate and Bright's Disease and Nephritis are often of long and slow development, while some cases show early response many cases show very little improvement with the first quarter of a dozen, hence patience is a necessity, particularly in cases of considerable duration.





Charts illustrating reports made by Physicians in 24 cases of BRIGHT'S DISEASE to show comparatively the number of days that elapsed between the beginning of the treatment and the elimination of the albumen.



- This sign in upper right hand corners designates cases in which the patient was a member of the Physician's family.
  - In cases bearing this sign the Physician himself was the patient.
  - +
- In blocks bearing this sign the percentage of albumen was reported as higher than 6%.  
The bottom line in each block means no ~~albumen~~ *alb*, or so attenuated it was referred to as a trace.

